Form # P 04 DISPLAY THIS	CARD ON PRINCIPAL	FRONTAGE OF WORK
Please Read	CITY OF PORT	
Application And Notes, If Any, Attached	PERMIT	ION PERMIT ISSUED
This is to certify that ADCAM ASSOC	IATES (, ed/Cook Construction	JUN - 9 2006
has permission to Set a temporary field	d trailor office	
AT 41 HUTCHINS DR		238A AGUTOGOF PORTLAND
provided that the person or per of the provisions of the Statut the construction, maintenance this department.	tes of line and of the fine of the second	epting this permit shall comply with all ances of the City of Portland regulating and of the application on file in
Apply to Public Works for street line and grade if nature d work requires such information.	N fication of insperion mu g n and ween permitten pro b re this Iding or of ther lied or the total strong of the ther JR NOTICE IS REQUIRED	A certificate of occupancy must be procured by owner before this build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS		
FireDept.		
Health Dept		
Appeal Board		112 June 4/100
Other DepartmentName		Divector - Building & Inspection Services
	PENALTY FOR REMOVING TH	lis card (

-

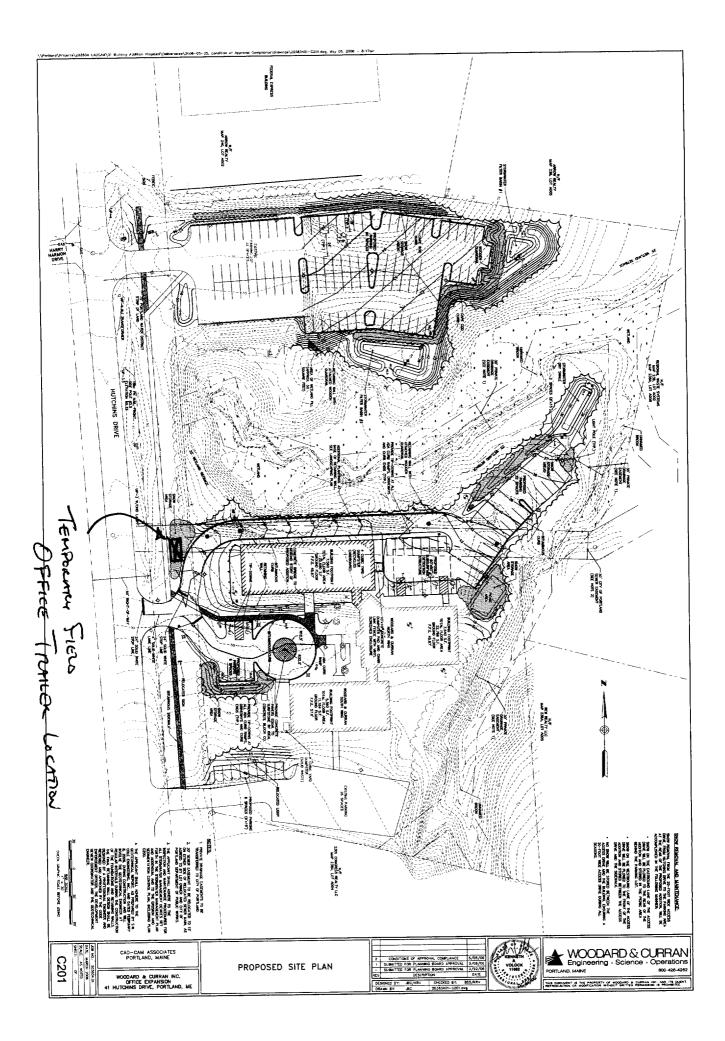
City of Portland, Mai	ne - Building or Use	Permit Application	Permit No:	Issue Date:	CBL:	<u> </u>
389 Congress Street, 041	01 Tel: (207) 874-8703	3, Fax: (207) 874-8716	6 06-0781	PENALIS	1-338A AQ0	1001
Location of Construction: 41 HUTCHINS DR	Owner Name: CADCAM AS	Owner Name: CADCAM ASSOCIATES		 R	Phone;	
Business Name:	Contractor Name	Contractor Name:			200 Phone	
	Allied/Cook C	Allied/Cook Construction		and	207772288	3
Lessee/Buyer's Name	Phone:	1	Permit Type: Additions - Comr	CITY OF POR	TLAND	I-M
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:	
Commercial	Commercial s	et a temporary field	\$30.00	\$1,000.00	3	
	trailor for offi	ce	FIRE DEPT:	Approved INSPE Denied Use G	CTION: roup: EMT	P. A.
Proposed Project Description:					$\varphi(M)$	~~
Set a temporary field trailor for office			Signature PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
			Action: Approve	ed Approved w	/Conditions D	enied
			Signature:		Date:	
Permit Taken By: dmartin	Date Applied For: 05/24/2006		Zoning	Approval		
1. This permit application	1 does not preclude the	Special Zone or Review	ws Zonin	g Appeal	Historic Preserv	ation
	ting applicable State and	Shoreland			Not in District of	or Landmark
2. Building permits do no						
septic or electrical wor	· ·	Wetland for far	Miscellar	neous	Does Not Requi	re Review
septic or electrical wor 3. Building permits are v	k. oid if work is not started	G Flood Zone	Miscellar		Does Not Requi	
septic or electrical wor	k. oid if work is not started of the date of issuance. invalidate a building	- of toning		nal Use		
 septic or electrical wor 3. Building permits are v within six (6) months of False information may 	k. oid if work is not started of the date of issuance. invalidate a building	GH TONT	Condition	nal Use ttion	Requires Review	v
 septic or electrical wor 3. Building permits are v within six (6) months of False information may 	k. oid if work is not started of the date of issuance. invalidate a building	G Flood Zone	Condition	nal Use ttion	Approved	v
septic or electrical wor 3. Building permits are v within six (6) months of False information may	k. oid if work is not started of the date of issuance. invalidate a building	Flood Zone Subdivision Site Plan	Condition	nal Use ttion 1	Requires Review Approved Approved w/Co	v

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Building or Use Permit			Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8710			06-0781	05/24/2006	238A A001001
Location of Construction:	Owner Name:		Owner Address:		Phone:
41 HUTCHINS DR	CADCAM ASSOCIATES		41 HUTCHINS DR		
Business Name:	Contractor Name:		Contractor Address:		Phone
	Allied/Cook Construction		PO Box 1396 Portland		(207) 772-2888
Lessee/Buyer's Name	Phone:		ermit Type:		
			Additions - Comm	nercial	
'roposed Use: Proposed			Project Description	:	
Commercial set a temporary field trail	lor for office	Set a te	mporary field trail	or for office	
					\checkmark



CHARLES URGENERAL

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment atrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 41 HUTCHINS DRIE PORTIND				
Total Square Footage o	f Proposed Structure	Square Footage of Lot		
Tax Assessor's Chart, BChart#Block#C3&AA	Block & Lot Lot# /	Owner: CIANCIPETTE FAMILY LIC 42 MATCHET ST. DONTAND ME 04101	Telephone: 774-1000	
Lessee/Buyer's Name (IfApplicable)	DONTION ME OYION	$\frac{\operatorname{cost Of}}{\operatorname{Work: \$} / \circ \circ \circ}$ Fee: $\$ 30.$ $C \text{ of } O \text{ Fee: \$}$	
Project description: TEMPORAMY FIELS OFFICE TMAILER LOCATION DER ATTACITES SITE DUN LOCATION DER ATTACITES SITE DUN DURATION 10 MONTHS - MARCH 2007 ±				
Contractor's name, address & telephone: Alles Cock Construction Who should we contact when the permit is ready: John Brocking (1154736 Mailing address: Phone: 772-2888 Alles Cock Construction Die Bes 1396 Ponno ME 04/04				

Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us cn-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized **agent**. I agree to conform to all applicable laws of this jurisdiction In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit. 0 0

autionity to chief an areas covered by this period at any f	
Signature of applicant:	DEPT. OF BUILDING INSPECTION Date: 9/24/06
	not commence ANY Of the permit is issued.
I his is nøt a permit; you may	RECEIVED

/