DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK **CITY OF PORTLAND**

Please Read

Application And Notes, If Any, Attached		PERM	CHON	Permit Number: 041523
This is to certify that	Kaufman <u>David/Viking</u> Replace & repair found			
AT 15 Hillcrest Ave			261	G005001
of the provision	ne person or pers ns of the Statutes on, maintenance a t.	s of I line and of the	ances o	this permit shall comply with all f the City of Portland regulating , and of the application on file in
	orks for street line re of work requires	g n and w n permis b re this ding or	osed-in.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
	IRED APPROVALS			
Fire Dept Health Dept Appeal Board	1 of 2 7004		0	10/26/04
OtherDepar	tment Name	ENALTY FOR REMOVI	NGTHIS CAR	Director - Building & Inspection Services

City of Portland, M	aine - Bui	lding or Use	Permit	t Application	ı P	ermit No:	Issue Date:		CBL:		
389 Congress Street, 0		_				04-1523	-		261 GO	O05001	
Location of Construction: Owner Name:					Own	er Address:	Phone:				
15 Hillcrest Ave Kaufman David					P.o.	.box 261					
Business Name:	Contractor Name	Contractor Name:			tractor Address:			Phone			
Viking			iking Restoration			09 Congress S	t Portland		2078282900		
Lessee/Buyer's Name Phone:						nit Type:		•	Zone:		
2 to see 2 day of 8 Talline					Al	terations - Dw	ellings			12-3	
Proposed Use:						mit Fee:	Cost of Work	: Cl	EO District:	7	
Single Family Home		Single Family Home/Replace &			\$48.00	\$2,700	0.00	3			
		repair foundation within existing			FIR	E DEPT: 1	NSPECT	~ ~			
		foot print				/ [Denied	Use Group	P. K-3	Type: 5B	
					<i>11 T/</i> .				TR		
] //// [7,003		
Proposed Project Description						$/\vee//$	-/ 1	1_			
Replace & repair founda	ition within e	existing foot prin	t		_	ature:	Signature:	P.A.D.)			
					ED.	ESTRIAN AU _					
					Acti	on: Appro	ved Appro	oved w/Co	onditi o ns	Denied	
					Signature:			D	Date:		
Permit Taken By:	Date Applied For:					Zoning	Approval				
ldobson	10/0	8/2004					, PP - 0 , w-	•			
			Spec	Special Zone or Reviews Zoning Appeal				Historic Preservation			
			☐ Sho	oreland	Variance				Not in District or Landmar		
				1 1				•			
	☐ Wetland			etland /		Miscellaneous			Does Not Re	equire Review	
			Flo	od Zone		Conditi	onal Use		Requires Re	view	
						1		1 _	٦		
			L Sui	division		Interpre	tation		Approved		
				, H			- 1		Approved w	/Conditions	
				J∕lan		Approv	eu] Approved w	Conditions	
			Mai ⊟	☐ Minor ☐ (MM	Denied				Denied C		
			Date:	0126104		late:		Date	19261	04	
				1 1					// /		
			C	ERTIFICATION	ON						
I hereby certify that I am											
I have been authorized by											
jurisdiction. In addition, shall have the authority to											
such permit.	, cinci an arc	cas covered by st	on perm	iic aic airy 10as01		nour to childr	ce the provisi	on or th	e coucis, ap	Pileudie to	
•											
SIGNATURE OF APPLICAN	т			ADDRESS			DATE		PHO)NE	
PIONALOKE OF ALL FICAN				ADDICES			DAIL		1110	/11L	

City of Portland, Maine - Bu 389 Congress Street, 04101 Tel:	O	Permit No: 04-1523	Date Applied For: 10/08/2004	CBL: 261 G005001				
Location of Construction:	Owner Name:	Owner Address: Phone:						
15 Hillcrest Ave	Kaufman David		P.o.box 261					
Business Name:	Contractor Name:		Contractor Address:	Phone				
	Viking Restoration		1809 Congress St I	(207) 828-2900				
Lessee/Buyer's Name	Phone:	P		Permit Type:				
			Alterations - Dwellings					
Single Family Home/ Replace & re	pair foundation within exi	isting Replac	ce & repair foundat	ion within existing fo	oot print			
Dept: Zoning Status: Note:	Approved	Reviewer:	Tammy Munson	Approval Da	nte: 10/26/2004 Ok to Issue: ✓			
Dept: Building Status: Note:	Approved	Reviewer:	Tammy Munson	Approval Da	nte: 10/26/2004 Ok to Issue: ✓			

All Purpose 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 arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 15 Hillcrest Ave								
Total Square Footage of Proposed Structucky	ıre	Square Footage of Lot						
Tax Assessor's Chart, Block & Lot Chart# 2 6 Block# 6 Lot# 5	Owner: DAVID KANFMAN Telephone: 329							
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: 54 Waltes Lah of Ref. Falmoth, Out 105 Fee: \$							
Current use: Single Family								
If the location is currently vacant, what wa	as prior use: _	Viv.	·.	0.2004				
Approximately how long has it been vacant:								
Proposed use: Stabilize tristing addition (foundation) V B Project description: Replace decayed cedar posts with new concrete Masonry units (Fastpiers) and PT posts to sill.								
Contractor's name, address & telephone: OWNES (work to done by Richardson Alage Movers for Viking Restauction)								
Who should we contact when the permit is ready: OWNES Mailing address: 54 War Landing Rd Falmorta ME 04105								
Mailing address: 54 War La	anding.	Rd Falmouth	A	H 04105				
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00fee if any work starts before the permit is picked up. PHONE:								
THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY								

THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

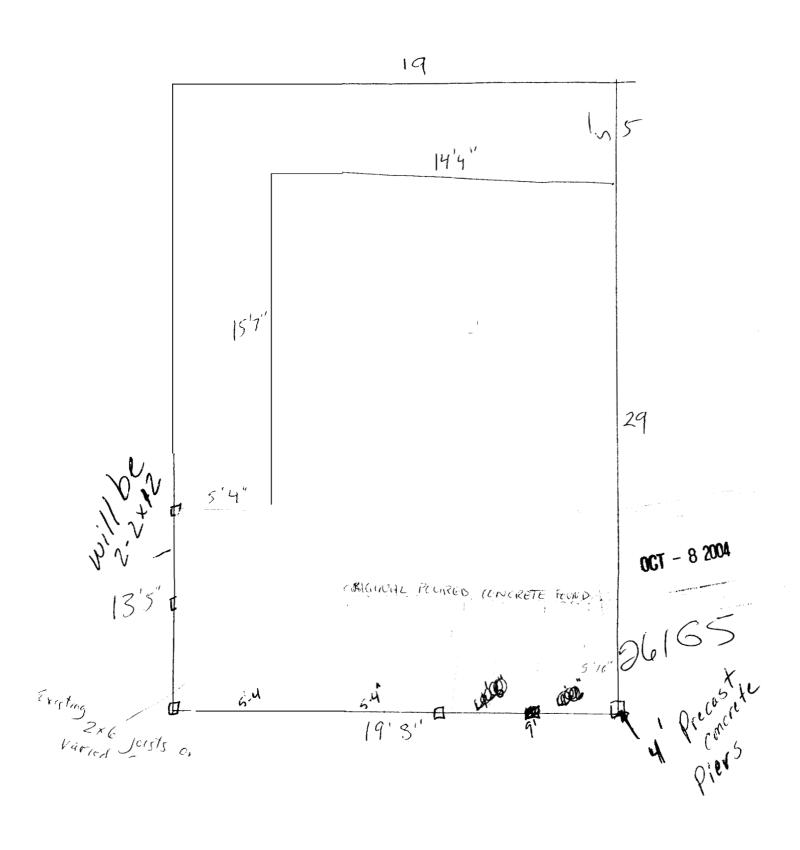
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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.

		\sim	1 1	A				
Signature of applicant:	Del)			Date: Oct	7	64	
		i		_ </td <td></td> <td></td> <td></td> <td></td>				

This is NOT a permit, you may not commence ANY work until the permit is issued.

If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

N



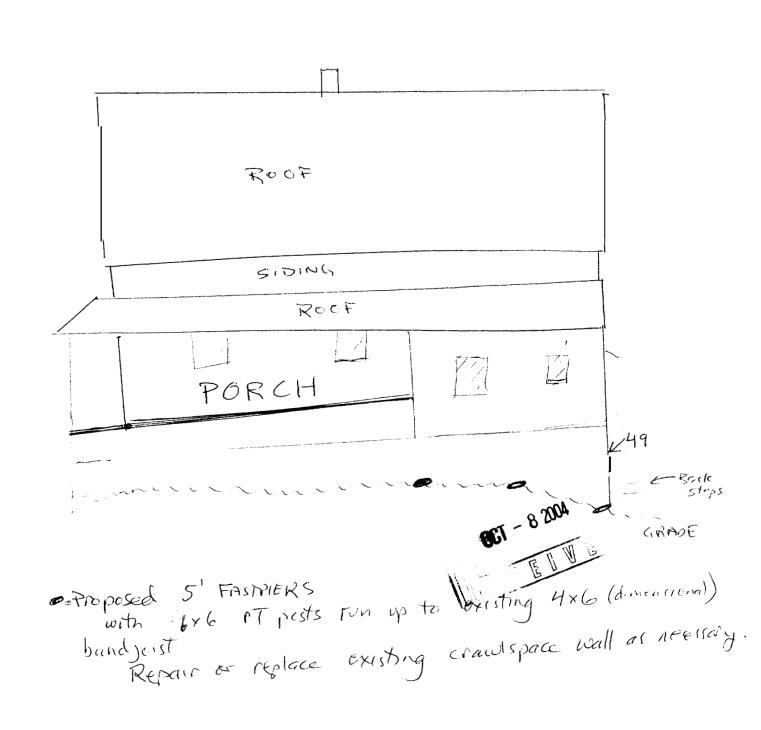


we to existing 4x6 (dimensional) bandjeist, with attaclied 2x3 (winds the noticed joists).

Existing ciaculspace will 2x4's (dimensional) and varied centure 1-2 Demolith as needed, all weight to be base by new PT poster

SECTION A

SOUTH ELEUATION Existing window



8

15 Hillcrest

2-18

127

No Change of Existing Footprint

26165

<-120' ->