Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

Health Dept. ____

Appeal Board _____

Department Name

PHILDING INCRECTION

Permit Number: 061823

This is to certify that _	PHILIPS TRAVIS /Hor	me o			PERMIT ISSUED
has permission to	Amend permit # 06140	6 cha roof ric	2		TERMINI TOOCES
AT 62 TAFT AVE			2	274 B019001	JAN 2 2 2007
of the provisio	he person or persons of the Statutes on, maintenance and.	of line and o			t shall comply with a of Portland resultation on file i
	Vorks for street line re of work requires	g n and w en t ore this Idi	inspe on mus e perm on proc ding or rt there sould osed-in the could be compared to the could be	procured t	te of occupancy must be by owner before this build- thereof is occupied.
OTHER REQU	JIRED APPROVALS				

PENALTY FOR REMOVING THIS CARD

City of Portland, M	Iaine - Buil	ding or Use	Permi	t Application	on Per	rmit No:	Issue Date	:	CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 8					,			274 B0	19001	
		Owner Name:	Name:		Owner	Owner Address:			Phone:	
62 TAFT AVE		PHILIPS TRAVIS		64 T	AFT AVE					
Business Name: Contracto		Contractor Name	:		Contr	actor Address:			Phone	
		Home owner								
Lessee/Buyer's Name Phone:					Permi	t Type:				Zone:
		l			Am	endment to S	Single Famil	y _	R3	
Past Use:		Proposed Use:			Permit Fee: Cost of Work:		k:	CEO District:		
Single Family Single Famil			amend permit # ge roof ridge hight		1	\$30.00		30.00	3	
					FIRE DEPT: Approved		INSPE	INSPECTION:		
								Denied Use Group: Q-3 TRC - 2 Signature: 1, 407		Type: 5B
					L	_ Beined	1003			
_		_			}			ļ	1100 0	
Proposed Project Descriptio					7			1	1 /	/
Amend permit # 061400	6 change roof	ridge hight			Signature: Si			Signat	gnature: 1, 407 Cliff	
					PEDE	PEDESTRIAN ACTIVITIES DISTRIC			CT (P.A.Dh)	
					Actio	n: Appro	ved App	proved v	ed w/Conditions Denied	
	·				Signature:				Date:	
Permit Taken By:		pplied For:				Zoning	g Approva	al		
dmartin	12/2	6/2006	- C	nial Zana an Dar					Historic Preservation	
1. This permit applica			Spe	ecial Zone or Reviews Zoning Appeal		- 1				
Applicant(s) from I	meeting applie	cable State and	nd Shoreland			Variance		- {	Not in District or Landmar	
Federal Rules.								į		
2. Building permits do		plumbing,	L w	etland/		Miscellaneous			Does Not Require Review	
septic or electrical work.										
3. Building permits ar			[_] F	lood Zone	Conditional Use			1	Requires Review	
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work			C to the distribution		'-		- 1	Approved		
			Subdivision				Approved			
			Site Plan Maj Minor MM				1	Approved w/Conditions Denied		
							1			
							i			
								ABL		
			Date: 12 12810h MAN Date:			Data	Date:		Date:	
			Date:	12106	71100	Date.			Date.	
	La to estat									
CITY OF	PORTLAI	₩ <u></u>								
And the state of t				CERTIFICAT	ION					
I hereby certify that I an	the owner of	f record of the na				nosed work i	is authorized	hv the	e owner of reco	ord and that
I have been authorized b										
jurisdiction. In addition	, if a permit for	or work describe	d in the	application is	issued,	I certify that	the code of	ficial's	authorized rep	resentative
shall have the authority	to enter all are	eas covered by s	uch per	mit at any reas	onable!	hour to enfor	ce the prov	ision o	of the code(s) ap	pplicable to
such permit.										
SIGNATURE OF APPLICANT			ADDRESS DAT		DATE	3	PHONE			
RESPONSIBLE PERSON IN	N CHARGE OF V	VORK, TITLE					DATE	<u> </u>	PHO	ONE

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	6 06-1823	12/26/2006	274 B019001			
Cocation of Construction: Owner Name:			Owner Address:		Phone:			
62 TAFT AVE	PHILIPS TRAVIS		64 TAFT AVE					
Business Name:	Contractor Name:		Contractor Address:		Phone			
	Home owner	Home owner						
Lessee/Buyer's Name	Phone:		Permit Type:	ermit Type:				
			Amendment to Si	ngle Family				
Proposed Use:		Propos	ed Project Description:					
Single Family amend permit # 0614	06 Change roof ridge hei	ght Amen	d permit # 061406	change roof ridge he	ight			
		İ						
Dept: Zoning Status:	Approved with Condition	ns Reviewer	: Ann Machado	Approval D	ate: 12/28/2006			
Note:	11			* *	Ok to Issue:			
This property shall remain a sing approval.	gle family dwelling. Any	change of use sh	all require a separa	te permit application	for review and			
,								
This permit is being approved or work.	n the basis of plans subm	itted. Any devia	tions shall require a	i separate approval b	efore starting that			
Dept: Building Status:	Approved with Condition	ns Reviewer	: Chris Hanson	Approval D	ate: 01/16/2007			
Note:					Ok to Issue:			
 Permit approved based on the pl noted on plans. 	ans submitted and review	ved w/owner/cor	tractor, with addition	onal information as a	greed on and as			
2) The design load spec sheets for	any engineered beam(s) r	nust be submitte	d to this office.					
Application approval based upo and approrval prior to work.	n information provided b	y applicant. Any	deviation from app	roved plans requires	separate review			
4) Fastener schedule per the IRC 2	003							
5) Separate permits are required fo	r any electrical, plumbing	g, or HVAC syst	ems.					

Comments:

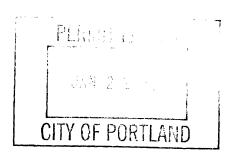
1/9/2007-csh: Talked w/ Travis Phillips about submitting detail of structural design of roof ridge, rafter extentions and lvl locations 1/9/07CSH

1/16/2007-csh: Met w/ Travis Phillips and went over structural design and I OK'd plan CSH 1/16/07

12/28/2006-amachado: Left message for Travis Philips. Need to know height from grade to new ridge line of roof.

12/28/2006-amachado: Travis left voicemail. New height from grade to ridge is 22'.

Separate plans may need to be submitted for approval as a part of this process.



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

Location/Address of Construction: × 62	Tart,	
Total Square Footage of Proposed Structure	O Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: Phillips	Telephone: 807 - 5/98
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: Above.	Cost Of Work: \$ Fee: \$ 30. C of O Fee: \$ NA
Current Specific use: Single Famel. If vacant, what was the previous use? Proposed Specific use: Project description: Amend permet #	}	
Contractor's name, address & telephone: Who should we contact when the permit is read Mailing address: EHTATT Ave Postland, MEDHIDZ		
Please submit all of the information outl	ined in the Commercial Application	Checklist.

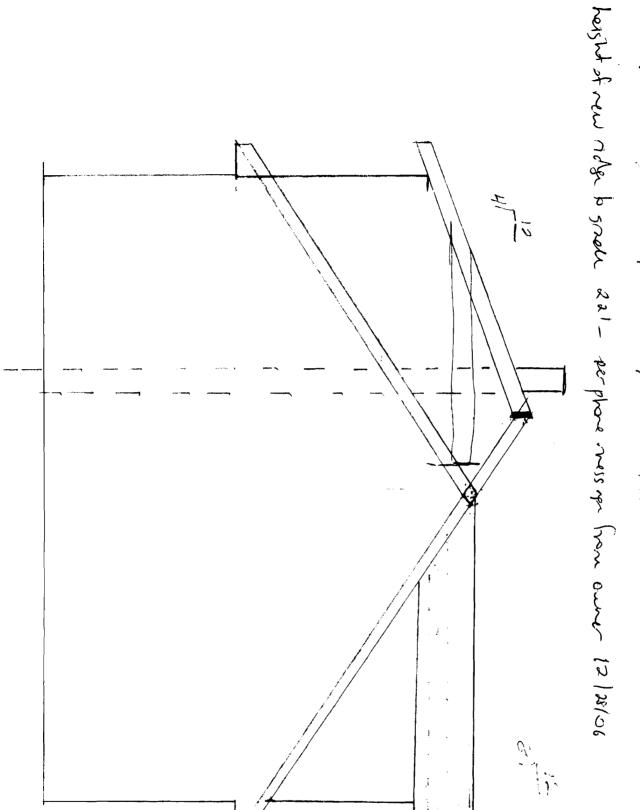
Failure to do so will result in the automatic denial of your permit.

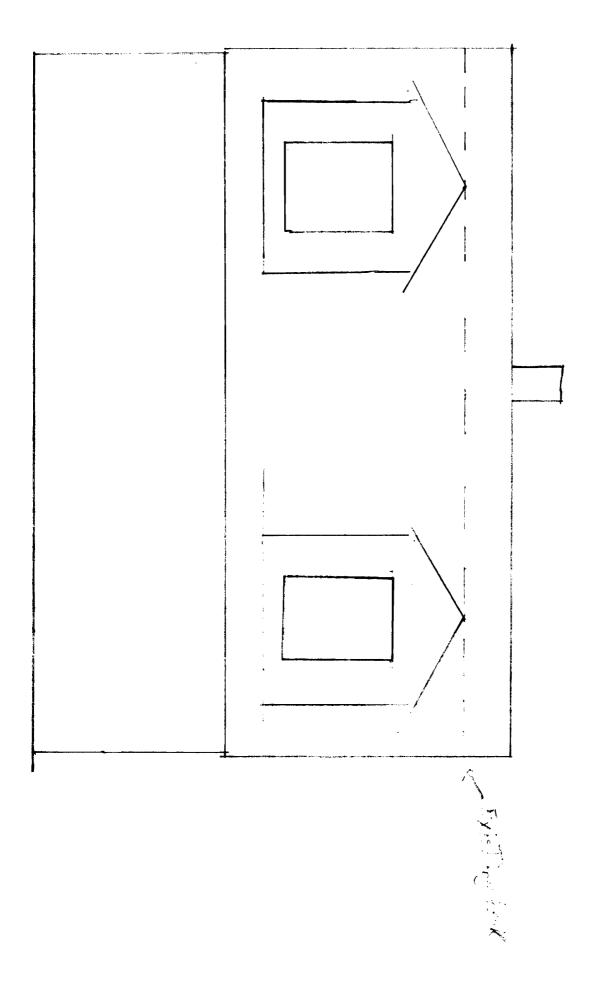
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room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

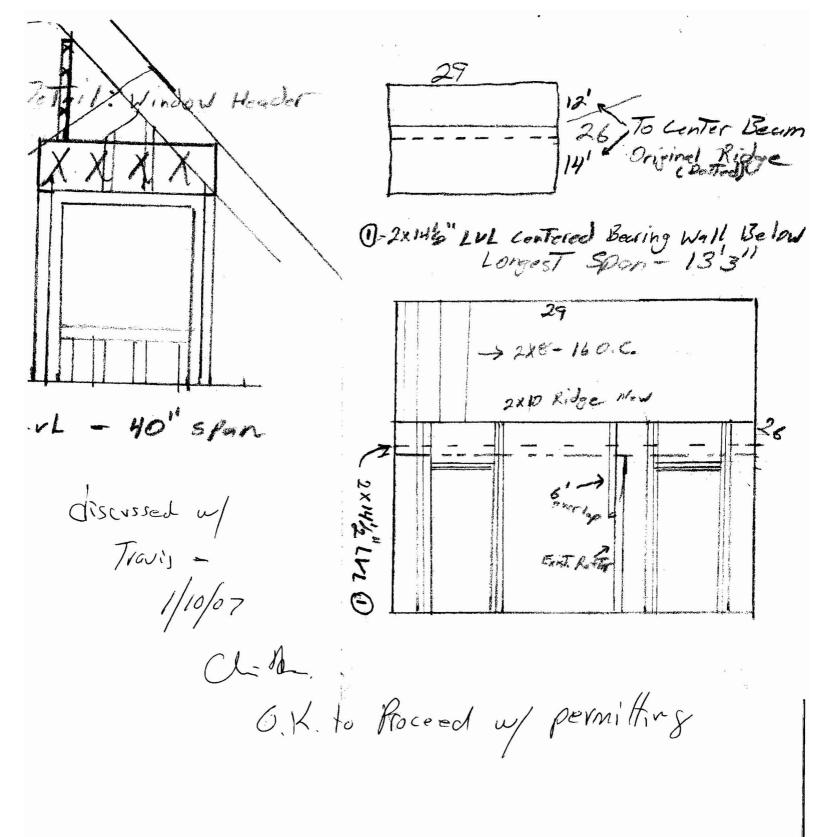
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition,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

Signature of applicant: VOEPT OF BUILDING INCRESSION D	Date: 12-2	6-06	
This is not a permit; You may not commence ANY work until	the permit is issu	ned.	
RECEIVED	#	401	1

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Floor Plan

