

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0856		Issue Date:		CBL: 293 D014001	
Location of Construction: 844 STEVENS AVE		Owner Name: MCLEOD SCOTT A ETAL		Owner Address: 21 CORNERSTONE DR	
Business Name:		Contractor Name: Rick Reynolds		Contractor Address: 8 Forst Heaven Road E Baldwin	
Lessee/Buyer's Name		Phone:		Permit Type: Alterations - Commercial	
Past Use: Commercial		Proposed Use: Commercial - Dividing wall between offices		Phone: 2078381387	
Proposed Project Description: Dividing wall between offices		Permit Fee: \$120.00		Cost of Work: \$10,000.00	
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		CEO District: 5	
		INSPECTION: Use Group: Type			
		Signature:		Signature:	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied			
		Signature: Date:			
Permit Taken By: ldobson		Date Applied For: 07/14/2008		Zoning Approval	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..		Special Zone or Reviews		Zoning Appeal	
		<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/> Date:		<input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	
		Historic Preservation			
		<input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied Date:			

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 APPLICAN

ADDRESS

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO

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Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone:

Dept: Zoning	Status: Pending	Reviewer:	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>
Dept: Building	Status: Pending	Reviewer: Tom Markley	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>

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SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO