389 Congress Street, 04101 Tel: (	0		<b>Application</b> 207) 874-8716	Pe	rmit No: 05-1759	Issue Dat	e:	CBL: 294 C06	8001
Location of Construction: Owner Name:		OABLE HOUSING PRE		Owner Address: 752 MAIN ST			Phone:		
				Contractor Address:			Phone		
Lessee/Buyer's Name Phone:				Permit Type: Alterations - Multi Family			Zone:		
roof repairs & a non bearing wa		/ Repairs after fire/ and replacement of alls in unit 1L and pairs throughout		Approved		00.00 INSPEC			
Proposed Project Description: Repairs after fire/ roof repairs & and unit 1L and Sheet rock repairs throug		on beari	ng walls in	Signa PEDE Actio	STRIAN ACTI	VITIES DIST		P.A.D.)	Denied
			Signature:				Date:		
ermit Taken By: Date Applied For: 12/06/2005			Zoning Approval						
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews  Shoreland		Zoning Appeal  Variance			Historic Preservation  Not in District or Landn		
2. Building permits do not include septic or electrical work.	Building permits do not include plumbing, septic or electrical work.		☐ Wetland		Miscellaneous			Does Not Require Revie	
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		☐ Flood Zon		Conditional Us			Requires Review		
		Subdivision		☐ Interpretatio			Approved		
		Site Plan			Approved			Approved w/Condition	
		Maj 🔲 Mino 🔲 MM 🗀		☐ ☐ Denied			Denied		
		Date:			Date:		Da	ate:	
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit found is a permit found in the shall have the authority to enter all and to such permit.	to make this appli or work described	med pro ication a l in the a	as his authorized application is iss	ne prop l agen sued, I	t and I agree t certify that th	o conform to ne code office	o all app cial's aut	plicable laws of thorized repres	of this sentative
SIGNATURE OF APPLICAN			ADDRES	S		DATE	L	PI	НО

1390 FOREST AVE	ation of Construction:  Owner Name:  EMC AFFORDABLE HOUSING PRE		Owner Address: 752 MAIN ST		Phone:	
Business Name:	Contractor Name:		Contractor Address:	tor Address: Phone		
Lessee/Buyer's Name	Phone:		Permit Type: Alterations - Multi Fa	mily		Zone:
Note: 1) All Fire separation assem	hablies must be maintained in confor	rmity with Cha	pter 7 of the IBC.		Ok to Issue	06/2005 e: ☑
, , , ,	1	stamped snop	drawing showing the tr	uss modification an	nd installati	ion
and bracing detail and ob	ptain approval prior to framing.  Status: Approved with Conditions			uss modification an  Approval Date		ion 06/2005
and bracing detail and ob  Dept: Fire S  Note:	otain approval prior to framing.	s <b>Reviewer</b>		Approval Date		06/2005

## **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
DECDONCIDI E DEDCON IN CHADCE OF WORK TIT	DATE	DIIO	