Cit	y of Portland, Maine	e - Build	ling or Use Pe	ermit A	Application	P	ermit No:	Issue Dat	e:	CBL:		
	Congress Street, 0410		0		* *		09-0907			296 C01	2001	
Location of Construction: Owner Name:				1		Owner Address:			Phone:			
			MOUNT SINA	AI CEMETERY ASSOC		185 HICKS ST						
Business Name: Lessee/Buyer's Name			Contractor Nan	ne:		Con	tractor Addres	s:		Phone		
			W A One Inc.			PO Box 10127 Portland			207773498	88		
			Phone:		Perr	nit Type:			•	Zone:		
						Duplex						
Past Use: Proposed Use:					Permit Fee: Cost		Cost of Wo	rk:	CEO District:	<u>-</u>		
Vacant Land Dupl			Duplex - construct a 28' x 32 Duplex - 896 sq ft w/2 Bedrooms per		3' x 32	\$1,345.00		\$125,0	00.00	5		
					FIRE DEPT: Approved IN		Approved	INSPE	SPECTION:			
							Use Gr	se Group: Type				
								_ Dellieu	renied			
Pro	posed Project Description:											
cor	nstruct a 28' x 32 Duplex -	896 sq ft	w/2 Bedrooms p			Signature:		Signatu	Signature:			
						PEDESTRIAN ACTIVITIES DISTRICT			TRICT (I	(P.A.D.)		
						Action Approved Approved				w/Condition Denied		
						Signature:				Date:		
Dor	mit Taken By:	Data A	pplied For:							Date.		
	dobson		/2009			Zoning Approval						
				Special Zone or Reviews		Zoning Appeal			Historic Preservation			
1.	 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 			Shoreland		_	☐ Variance		Not in District or Landm			
2.	Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous			Does Not Require Revie				
3. Building permits are void if work is no within six (6) months of the date of iss				Flood Zon		Conditional Us			Requires Review			
False information may invalidate a building permit and stop all work				Subdivision			☐ Interpretatio			Approved		
			Site Plan Maj Mino MM			Approved			Approved w/Condition			
						Denied			Denied			
			Date:			Date:		D	ate:			
I ha juri: shal	ereby certify that I am the tive been authorized by the sdiction. In addition, if a Il have the authority to en uch permit.	e owner to permit for	o make this appli r work described	med proication a	as his authorized application is iss	ne pro d age sued,	nt and I agree I certify that t	to conform the code office	to all ap cial's au	plicable laws thorized repre	of this sentative	
SIC	GNATURE OF APPLICAN				ADDRES	<u> </u>		DATE		p	НО	
510	or million				110011131	-		Dilli	-	1		

Location of Construction:	Owner Name:	Owner Name:		Owner Address:		Phone:		
204 Hicks St	MOUNT SINAI CEMI	MOUNT SINAI CEMETERY ASSOC		185 HICKS ST				
Business Name:	Contractor Name: W A One Inc.		Contractor Address: PO Box 10127 Portland	Phone 207773498	00			
I/DI- N		T			201113490	1		
Lessee/Buyer's Name	Phone:		Permit Type: Duplex			Zone:		
		<u>. </u>	Биріск					
Dept: Zoning Statu	us: Approved with Conditio	ns Reviewer	: Marge Schmuckal	Approval Dat	te: 08	/27/2009		
Note:					Ok to Issu	e: 🗹		
1) A separate permit shall be of	btained for a shed shown at t	he rear of the lo	t (SW corner) or the shed	shall be remove	ed.			
2) This application shows not o	daylight basement in the rear	and no bulkhea	ds.					
	Separate permits shall be required for future decks, sheds, pools, and/or garages. Currently there are no rear decks, only a rear entry platform and stairs. Separate permits shall be required for the addition of rear decks.							
4) This property shall remain a approval.	two family dwelling. Any ch	ange of use shal	l require a separate permi	t application for	review and			
	This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. It is noted that this lot is currently 25,246 sq ft in size. THE LOT SHALL NOT BE DIVIDED PRIOR TO REQUIRED REVIEWS							
Dept: Building Statu	us: Approved with Conditio	ns Reviewer	: Tom Markley	Approval Dat	te: 09	/10/2009		
Note:			·		Ok to Issu	e: 🗆		
All floors and walls that sepa assembly and sound transmis		ng units and cor	nmon areas are required t	o meet a 1 hour	fire rated			
2) All penetrations between dwelling units and dwelling units and common areas shall be protected with approved firestop materials, and recessed lighting/vent fixtures shall not reduce the (1 hour) required rating per Sec. 712 of IBC								
3) There must be a 2" clearance maintained between the chimney and any combustible material, with draft stopping per code at each level								
Hardwired interconnected by level.	Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every							
5) The design load spec sheets for any engineered beam(s) / Trusses must be submitted to this office.								
1 ' 10	6) A copy of the enclosed chimney or fireplace disclosure must be submitted to this office upon completion of the permitted work or for the Certificate of Occupancy.							
1 1 1	7) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.							
8) Application approval based and approrval prior to work.		y applicant. An	y deviation from approve	d plans requires	separate re	view		
Comments:								
8/27/2009-mes: currently this lot WAIT for Planning SITE PLAN		ot - 296-C-12 th	ru 16 - the site plan is unde	er the new systen	n #09-79900	0007		
L		CERTIFICATION)N					
I hereby certify that I am the own I have been authorized by the ow jurisdiction. In addition, if a pern shall have the authority to enter a to such permit.	ner of record of the named proper to make this application and for work described in the	operty, or that the as his authorized application is iss	ne proposed work is author I agent and I agree to con sued, I certify that the cod	form to all appli le official's autho	cable laws orized repre	of this sentative		
SIGNATURE OF APPLICAN		ADDRES	S	DATE	P	НО		
RESPONSIBLE PERSON IN CHARC	GE OF WORK, TIT			DATE	P	НО		

MOUNT SINAI CEMI	ETERY ASSOC	185 HICKS ST		Phone:	
Business Name: WA One Inc.				none 077734988	
Phone:		, , , , , , , , , , , , , , , , , , ,		Zone:	
	Contractor Name: W A One Inc.	Contractor Name: W A One Inc.	W A One Inc. PO Box 10127 Portland	Contractor Name: W A One Inc. Po Box 10127 Portland Phone: Permit Type:	

9/28/2009-mes: Jim Wolf, the developer is now dividing up the lot and has changed the site plan. Legal is looking into whether this is a subdivision. I have re-reviewed it.

11/25/2009-tm: Phil Dipierro sent an E-mail to approve issuing the building permit.

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	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO