Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BU

Permit Number: 100276

provided that the person or persons	s. file or co	non ac	ating this permit s	hall comply with all
AT202 HICKS ST		g	296 C012001	MAR 2 2 2010
has permission tochange roof system from re	oof: ses to co	ntions aming to	7 7 11 /	
This is to certify thatPOMPEO_IOHN M /Porpo	erty ner		PE	RMIT ISSUED
		\		

of the provisions of the Statutes of Mane and of the Categories of the City of Potaland regulating the construction, maintenance and use of buildings and structure this department.

Apply to Public Works for street line and grade if nature of work requires such information.

ation o Not spection must bl nd writte bermissi brocured give befd this bui g or p hereof is lath or oth sed-in. 2 NOTICE IS REQUIRED. HO

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

res, and of the application on file in

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept. Appeal Board Other _ Department Name

PENALTY FOR REMOVING THIS CARD

City of Portland, Ma 389 Congress Street, 04		•				10-0276			296 C01	2001
Location of Construction:		Owner Name:	, I a			r Address:		==	Phone:	
202 HICKS ST		1	JNI M			BOX 321			Pnone:	
Business Name:		POMPEO JOS Contractor Name				actor Address:			Db c	
BAOTHESS TARME:		Porperty Own			Contr	actor Address;			Phone	
Lessee/Buyer's Name		Phone:			Danni	t Type:			 _	7
Lessee/Duyer a Maine		rnone:			1		inala Famili		7	zone: R-3
			===	<u> </u>		endment to S				<u>, </u>
Past Use:		Proposed Use:			Perm	it Fee:	Cost of Wor		CEO District:	
Single Family Home - Co permit# 090907	onnected w/	Single Family permit#09090		Connected w/				0.00	5	l
permin 030307		permit#09090			FIRE 	DEPT:	Approved	INSPE	CTION:	- ~
		from roof trus					Denicd	Use G	roup: R ろ	Type: SE
		framing to for	n a fire	proof party in				<u>ہـ</u>	-D / 20/	12
		attic space /	nodit	i Fire parto	15			ل	KC-200	ソ フ
Proposed Project Description:					l			\	1 07	1.1
change roof system from proof party-in attic space	rooi musses	to conventional			Signa		HITTER DICE	Signat	ure: MD 2	1241
			76	nodify	PEDE	STRIAN ACT	IVITIES DIST	KICT (TOUP: R 3 TRC - 200 TRC - 200 TRC - 200 TRC - 200	<i>'</i>
fire partition					Actio	n: Approv		oroved w		Denied
					Signa	tura.			Date:	
Permit Taken By:	Date A	oplied For:			57616			-		
Idobson	_ I	2/2010				Zoning	Approva	1.6		
			Sne	cial Zone or Revie		Zoni	ng Appeal		Historic Prese	rvation
1. This permit applicati		-	l `		***5					
Applicant(s) from me Federal Rules.	eeting applic	able State and	∐ Sh	oreland		[∐ Variane	e	ſ	Not in Distric	t or Landr
-								ł		
2. Building permits do	•	olumbing,	🗆 w	etland		Miseella	ueous		Does Not Req	uire Revie
septic or electrical w				4.0						
3. Building permits are			Flood Zone			Conditional Use		Ì	Requires Review	
within six (6) months False information ma				No al factorio :				ſ	<i>i</i> □ *	
permit and stop all w		a outlaing	<u> </u> 30	bdivision		[Interpre	THETON	Ì	Approved	
1 F			 	. Di		[,			A	N 4141
			∟ sn	te Plan		Approve	ea		Approved w/C	onditions
			1401	T Minor C MM	,	☐ Denied		1	Denied	
			Maj [Minor MM	<u> </u>	Denied			Denied	
		_				.				
		CLIFD	Date:			Date:			Date:	 _
-FD1	MIT 15	SUED								
PEU.	Ari -									
	MAR 22	<i>2010</i>								
•	MAR 22									
			•	ERTIFICATI	ΩN					
hereby certify that I am t	restrot Pe	ortland	_			nagad wark i	, puthorized	hu tha	ourse of soos	d and the
I have been authorized by										
urisdiction. In addition, i										
shall have the authority to										
such permit.										
SIGNATURE OF APPLICANT				ADDRES			DATE		PHO	VE
SIGNATIONS OF BUILDINGS	•			, WINES	-		DAIL	-	11101	
			_	<u> </u>	_			_		
RESPONSIBLE PERSON IN C	THADGE OF SE	JODE TITLE					DATE		PHO	ATC:

City of Portland, M 389 Congress Street,		•		11 97 16	Permit No: 10-0276	Date Applied For: 03/22/2010	CBL: 296 C012001
			(201) 67			<u> </u>	
Location of Construction:		Owner Name:			Owner Address:		Phone:
202 HICKS ST		POMPEO JOHN M			PO BOX 321		
Business Name:	-	Contractor Name:			Contractor Address:		Phone
		Porperty Owner		i			
Lessee/Buyer's Name		Phone:			Permit Type:		
				l	Amendment to Sin	ngle Family	
Proposed Use:	<u> </u>	<u> </u>		Propose	l Project Description;		
fire partition in attic	ii trusses to et	onventional framing, mo	uiiy	ine pa	rtition in attic		
Dept: Zoning	Status: A	Approved with Condition	ns Re	viewer:	Jeanine Bourke	Approval D	Pate: 03/22/2010
Note:							Ok to Issue: 🗹
1) All previous condit	ions apply						
Dept: Building Note:	Status: A	Approved with Condition	ns Re	viewer:	Jeanine Bourke	Approval D	Pate: 03/22/2010 Ok to Issue: ✓
1) All previous condit	ions apply						
<u> </u>							

Comments:

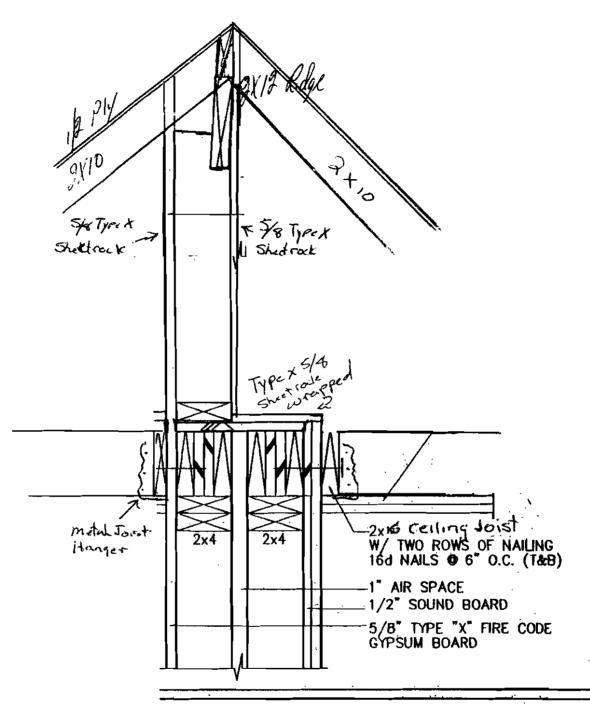
3/22/2010-jmb: Same day review

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.

Total Square Footage of Proposed Structure Tax Assessor's Chart, Block & Lot Chart# Block# Lot# AGG I A Lessee/DBA (If Applicable)	Applicant *must be owner, Lessee or Buy Name John Pompeo Address PO BOX 23/ City, State & Zip Gorham Mt 040 Owner (if different from Applicant) Name	207 776-8130
Chart# Block# Lot# 296 C 12	Name John Pompeo Address PO BOX 23/ City, State & Zip Gorham ME 046 Owner (if different from Applicant) Name	038 Cost Of
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name	Cost Of
	Address City, State & Zip	C of O Fee: \$ Total Fee: \$
Proposed Specific use:	ystem from Roof trusses to a	
City, State & Zip Gocham ME C	24038	
Please submit all of the information do so will result in the	n outlined on the applicable Checkine automatic denial of your permit.	Court Control Department
or the justice of the feet of	issuance of a permit. For further information tions Division on-line at www.portlandmanne.gov named property, or that the owner of record auth is application as his/her authorized agent. I agree ork described in this application is issued, I certifyenter all areas covered by this permit at any reason	The Secretary of the second of

This is not a permit; you may not commence ANY work until the permit is issue



PARTY WALL DETAIL