

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 736 Riverside Street		Owner: Terrance Schumaker		Phone: 797-3920		Permit No. 960523 PERMIT ISSUED Permit Issued: JUN 1 1996 CITY OF PORTLAND		
Owner Address:		Leasee/Buyer's Name:		Phone:			Business Name:	
Contractor Name: Shawn Schumaker		Address: P. O. Box 274, No Waterboro, 04061		Phone: 247-5466				
Past Use: Retail		Proposed Use: Same w/ext reno		COST OF WORK: \$6,000.00			PERMIT FEE: \$50.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: M Type: 100 CA 93		
Proposed Project Description: Exterior renovations as per plans - windows				Signature: [Signature]		Signature: [Signature]		
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied				
				Signature: [Signature]		Date: [Date]		
Permit Taken By: Vicki Dover		Date Applied For: June 6, 1996						

1. This permit application doesn't 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..

MAIL TO NO. WATERBORO ADDRESS

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 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 provisions of the code(s) applicable to such permit

P.O. BOX 274, NO WATERBORO 04061 5/6/96

SIGNATURE OF APPLICANT Shawn Schumaker ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

- Zoning Appeal**
- ☐ Variance
 - ☐ Miscellaneous
 - ☐ Conditional Use
 - ☐ Interpretation
 - ☐ Approved
 - ☐ Denied

- Historic Preservation**
- ☐ Not in District or Landmark
 - ☐ Does Not Require Review
 - ☐ Requires Review

- Action:**
- ☐ Approved
 - ☐ Approved with Conditions
 - ☐ Denied

Date: 6/7/96

CEO DISTRICT 7

COMMENTS

8-29-96 no modifications completed close

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

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Location of Construction: 736 Riverside Street		Owner: Terrence Schumaker		Phone: 797-3920		Permit No: 960529
Owner Address:		Leasee/Buyer's Name:		Business Name:		
Contractor Name: Shawn Schumaker		Address: P. O. Box 274, No Waterboro 04061		Phone: 247-5466		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED JUN 11 1996 CITY OF PORTLAND </div>
Past Use: Retail		Proposed Use: Same w/ext reno		COST OF WORK: \$6,000.00 PERMIT FEE: \$50.00		
Proposed Project Description: Exterior renovations as per plans <i>new windows</i>		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>[Signature]</i>		INSPECTION: Use Group: <i>BOCA 93</i> Type: <i>[Signature]</i> Signature: <i>[Signature]</i>		Zone: <i>B-2</i> CBL: <i>324 374 B-002</i> Zoning Approval: <i>[Signature] 6/10/96</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		
Permit Taken By: Vicki Dover		Date Applied For: June 6, 1996				

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SIGNATURE OF APPLICANT *[Signature]* Shawn Schumaker ADDRESS: P.O. BOX 274, No WATERBORO 04061 DATE: 6/6/96 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Action:
☐ Approved
☐ Approved with Conditions
☐ Denied

Date: *6/7/96*

CEO DISTRICT

7

D. Jordan