Form # P 04

Fire Dept. Health Dept. Appeal Board _ mer_

Department Name

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND PERMIT ISSUED Please Read PECTION Application And Notes, if Any, Permit Number: 060838 PERMI Attached JUN 2 1 2006 **GOULD MARCY A** This is to certify that_ CITY OF PORTLAND Interior renovations, bring s walls to viden 2 d ters has permission to ___ 370 A006001 AT 1423 RIVERSIDE ST provided that the person or persons tion a epting this permit shall comply with al m or ances of the City of Portland regulating of the provisions of the Statutes of I ine and of the ctures, and of the application on file ir of buildings and the construction, maintenance and u this department. fication inspe n mus Apply to Public Works for street line n and w en permi on proci A certificate of occupancy must be ding or and grade if nature of work requires procured by owner before this buildre this t there such information. ing or part thereof is occupied. ed or osed-in JR NOTICE IS MEQUIRED. OTHER REQUIRED APPROVALS

PENALTY FOR REMOVING THIS CARD

Director & Building & Inspection Services

City of Portland, Main 389 Congress Street, 0410				ermit No Fisque Marie:	ISSU 5 BL: 370 A \$06001			
'Location of Construction:	ration of Construction: Owner Name:			er Address: JUN 3	Phone:			
1423 RIVERSIDE ST	GOULD MAR	RCY A	142	1423 RIVERSIDE ST				
Business Name:	Contractor Name	:: 		Contractor Address Phone				
Lessee/Buyer's Name	Phone:			Permit Type: Amendment to Single Family Zone: 2 2				
Past Use:	Proposed Use:	Proposed Use:		Permit Fee: Cost of Work: CEO District:				
Single Family Home	Home/ Interior ring short walls	to FIRI	\$30.00					
Proposed Project Description:	len 2 doors		Denied	Use Group: $R-3$ Type: SB				
Interior renovations, bring s	short walls to rafters and w	viden 2 doors		Signature: Signature:				
		PEDI Actio	on: Approved Appr	RICT (P.A.D.) roved w/Conditions Denied				
			Sign	ature:	Date:			
Permit Taken By: Idobson Date Applied For: 06/07/2006				Zoning Approval				
1. This permit application	does not preclude the	Special Zone or Reviews		Zoning Appeal	Historic Preservation			
1. This permit application does not preclude the Applicantis) from meeting applicable State and Federal Rules.		Shoreland Wetland Flood Zone Subdivision Site Plan		☐ Variance	Not in District or Landmar			
Building permits do no septic or electrical worl	Miscellaneous			Does Not Require Review				
3. Building permits are vowithin six (6) months o	Conditional Use			Requires Review				
False information may permit and stop all wor	Interpretation			Approved				
	Approved			Approved w/Conditions				
		Maj Minor	MM 🔲	Denied	Denied ,			
		Date U	164	late:)ate: 6/10/04			
I have been authorized by the jurisdiction. In addition, if a	e owner to make this appli a permit for work describe	med property, o cation as his aut d in the application	horized ager on is issued,	nt and I agree to conform to I certify that the code offi	by the owner of record and that o all applicable laws of this icial's authorized representative sion of the code(s) applicable to			

ADDRESS

DATE

DATE

PHONE

PHONE

SIGNATURE OF APPLICANT

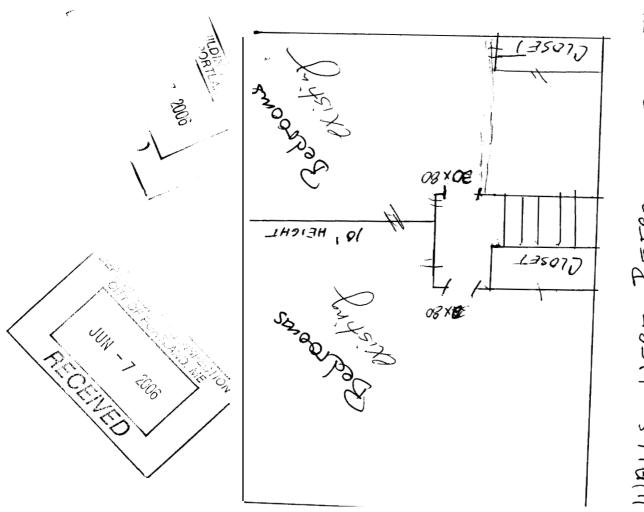
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

General Building Permit Application

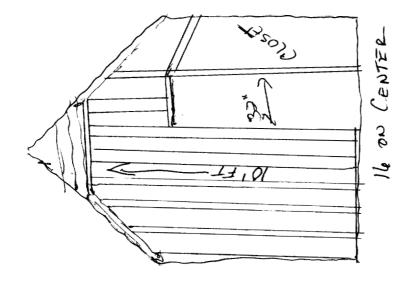
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

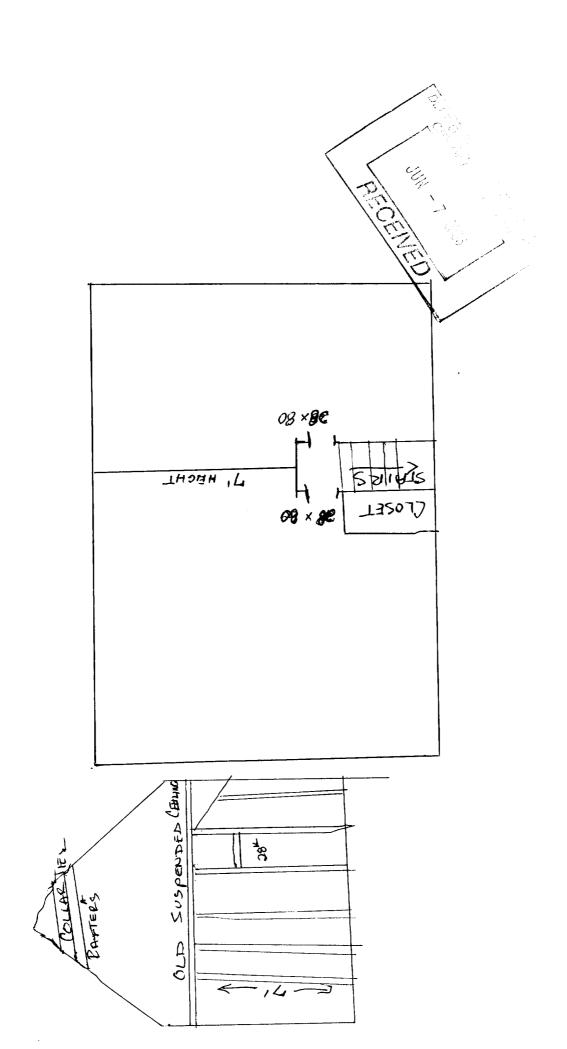
Total Square Footage of Proposed Structure	Square Footage	of Lot						
		,						
Tax Assessor's Chart, Block & Lot	owner:	Telephone:						
Chart# Block# Lot#		111-11117						
	MARCY (SOUL	D 415-4447						
Lessee/Buyer's Name (If Applicable)	Applicant name, address & to MARCY GOULT	clephone: cost Of Work: \$ 300, 00						
	756 GRAY PD							
	PORTLAND, ME Fee: \$							
]	C of O Fee: \$						
Current Specific use: WAU DIV		ne						
If vacant, what was the previous use?	u įį							
Proposed Specific use:								
Project description:								
REMOVAL OF 7'WALLS	+ RECONSTRUCT	- TO 10FT.						
OPENED LANDING SPACE								
WIDERED DOOR SING	es fo 28" to	30"+ 32"						
WIDERED BOOR SINES FR 38" TO 30"+ 32" Contractor's name, address & telephone:								
Who should we contact when the permit is ready: Malling address: Phone: 415 4447								
Mailing address: Phone: 415,444								
Please submit all of the information out		pplication Checklist.						
Failure to do so will result in the automatic denial of your permit.								
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may								
request additional information prior to the issuance of a permit. For further information visit us on-line at								
request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, from 315 City Hall or call 874-8703.								
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have								
been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the								
authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.								
Signature of applicant:	1 /1/	Date: 6/7/04						
		/ /						

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



BLOCKING RAFTERS AND SECURING NEW TO PLATES ALONG PAFFEES. TO 101 aND WAS ATTACHED BY WALLS WERE REFERENT W PYB





City of Portland, Maine - 1 389 Congress Street, 04101 T	_	Permit No: 06-0838	Date Applied For: 0610712006	CBL: 370 A006001	
Location of Construction: Owner Name:			Owner Address:	Phone:	
1423 RIVERSIDE ST	GOULD MARCY A		1423 RIVERSIDE ST		
Business Name:	Contractor Name:		Contractor Address:		Phone
Lessee/Buyer's Name Phone:		Permit Type:			
	L	Alterations - Dwel			
Proposed Use:		Proposed	Project Description:		
Single Family Home/ Interior ren rafters and widen 2 doors	ovations, bring short walls to	Interio	renovations, bring	short walls to rafters	and widen 2 doors
Dept: Zoning Status	s: Approved	Reviewer:	Tammy Munson	Āpproval Da	ite: 0612012006
Note:					Ok to Issue: 🗹
Dept: Building Status Note:	s: Approved	Reviewer:	Tammy Munson	Approval Da	te: 0612012006 Ok to Issue: □