

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

Permit No: 06-1556	Issue Date:	CBL: 371 A014001
------------------------------	--------------------	----------------------------

Location of Construction: 1925 WASHINGTON AVE	Owner Name: AZZOPARDI JOHANN & INGRID	Owner Address: 1925 WASHINGTON AVE	Phone:
Business Name:	Contractor Name: n/ a	Contractor Address: Portland	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use Home Occupation	Zone:

Past Use: Single Family	Proposed Use: Single Family change of use, Daycare for up to 12 children	Permit Fee: \$105.00	Cost of Work: \$105.00	CEO District: 5
Proposed Project Description: Change of use, Daycare for up to 12 children		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature: Date:				

Permit Taken By: dmartin	Date Applied For: 10/23/2006	Zoning Approval		
------------------------------------	--	------------------------	--	--

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/> Date:	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied Date:
---	---	---

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
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO

Location of Construction: 1925 WASHINGTON AVE	Owner Name: AZZOPARDI JOHANN & INGRID	Owner Address: 1925 WASHINGTON AVE	Phone:
Business Name:	Contractor Name: n/ a	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use Home Occupation	Zone:

Dept: Zoning	Status: Approved with Conditions	Reviewer: Marge Schmuckal	Approval Date: 10/27/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Separate permits shall be required for any new signage. 2) No certificate of occupancy will be issued until the condition of the Zoning Board of Appeals has been completed. 3) Your Daycare for up to 12 children was approved on 8/3/06 by the Zoning Board of Appeals with the condition that a "paved turn around area must be created at the existing driveway similar to that depicted on submitted survey map for adequate drop off/exit area or improved turnaround (i.e. gravel, paving stones, buit not dirt or grass)". 4) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 11/01/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) This is a Change of Use ONLY permit. It does NOT authorize any construction activities.			

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
-----------------------	---------	------	-----

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT	DATE	PHO
---	------	-----