Please Read Application And	ARD ON PRINCIPAL FRONTAGE OF WORK ITY OF PORTLAND BUTTON PERMIT ISSUED
Notes, If Any, Attached This is to certify that JOHNSON WILLIAN	PERMIT Permit Number: 100550 JUN 1 2010 1 C & CH STINE I Construct
has permission to <u>replace deck & stairs</u> AT 17 SHINGLE WAY provided that the person or pers	CR 376 A032001
of the provisions of the Statutes	
Apply to Public Works for street line and grade if nature of work requires such information.	Not ation of ispectic must be give and writte permissic procured before this but led or parchereof is lather or other seed-in. 2. HOL NOTICE IS REQUIRED. A certificate of occupancy must be procured by owner before this ing or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept.	
Health Dept.	
Appeal Board Other	
Department Name	PENALTY FOR REMOVING THIS CARD
	Close 427/18

City of Portland, Maine - Bu	-		ation	rmit No:	Issue Date:	CBL:		
O Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871		-8716	10-0550		376 A	376 A032001		
Location of Construction:	$I \cup I \cup I \cup I$		1	Owner Address:		Phone:		
17 SHINGLE WAY / Cott Ageh			RIS 17 S	HINGLE WA	Y			
Business Name:	Contractor Name		1	actor Address:		Phone		
	Dirfy Construc	ctors		Box 146 Limi	ington	2072295	2072295456	
.essee/Buyer's Name	essee/Buyer's Name Phone:		1	Permit Type: Alterations - Dwellings			Zone: R-3 PK	
Past Use:	Proposed Use:		Permi	Permit Fee: Cost of Work: C			Tattages	
1 -		Home - replace de	eck	\$50.00	\$2,575.0	0 5	0	
	& stairs		FIRE	FIRE DEPT: Approved INSPECTION: Use Group: 12:3 Type: J			Type:IB	
Proposed Project Description:			- 1/	Signature: Signature		A	ature:	
replace deck & stairs						<u> </u>		
			PEDE	STRIAN ACTIV	TITIES DISTRIC	CT (P.A.D)		
			Action		d Approve	ed w/Conditions	Denied	
	and the second of the second s		Signa			Date:		
	Applied For: 20/2010			Zoning	Approval			
1. This permit application does no		Special Zone or	Reviews	Zonin	g Appeal	Historic Pre	servation	
Applicant(s) from meeting app Federal Rules.		Shoreland		☐ Variance		Not in Distri	ct or Landmar	
 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 		☐ Wetland ☐ Flood Zone ☐ Subdivision		Miscellaneous		Does Not Re	Does Not Require Review	
				Condition	ial Use	Requires Review		
				☐ Interpretation ☐ Ap		Approved	pproved	
ga		Site Plan		Approved	I	Approved w	/Conditions	
PERMIT ISSUED Maj Mindry N W ()		MM	Denied		Denied			
		Date	1211	Date		Date:		
JUN - 1 2010			7/64/11	5		1540.		
	7		, , ,					
CITY OF PORTLAN	<u>ן ע</u>							
		CERTIFIC	TATIONI					
hereby certify that I am the owner of have been authorized by the owner urisdiction. In addition, if a permit hall have the authority to enter all a uch permit.	to make this appli for work describe	med property, or in ication as his auth din the application	that the proportion or is issued,	t and I agree to I certify that the	o conform to a he code officia	ll applicable laws il's authorized rep	of this resentative	
SIGNATURE OF APPLICANT ADDRES								

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

6-16-18 Old topour on redge Coll for find MD

6.24-10 Ok to close permit -

City of Portland, Maine - Building or Use Permit 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8710			Permit No: 10-0550	Date Applied For: 05/20/2010	CBL: 376 A032001	
Location of Construction: Owner Name:			Owner Address:		Phone:	
17 SHINGLE WAY	JOHNSON WILLIAM C & CHRIS		17 SHINGLE WA			
Business Name:	Contractor Name:		Contractor Address:	Phone		
	Dirfy Constructors		P.O. Box 146 Lim	ington	(207) 229-5456	
Lessee/Buyer's Name	Phone:		Permit Type:			
			Alterations - Dwe	ellings		
Proposed Use:		Propose	ed Project Description:			
Single Family Home - replace deck & stairs			replace deck & stairs			
omgo raminy frome - replace						
Dept: Zoning St	tatus: Approved with Condition	ns Reviewer	: Marge Schmuck	al Approval l		
Dept: Zoning St Note:	tatus: Approved with Condition required for future decks, sheds		J	al Approval l	Date: 05/24/2010 Ok to Issue: ✓	
Dept: Zoning St Note: 1) Separate permits shall be 2) This is NOT an approval		s, pools, and/or g You SHALL N	garages. OT add any a dditio	onal kitchen equipm	Ok to Issue: 🗸	
Dept: Zoning St Note: 1) Separate permits shall be 2) This is NOT an approval not limited to items such 3) This property as part of a	required for future decks, sheds	s, pools, and/or g You SHALL Nators, or kitchen	garages. OT add any a dditic sinks, etc. Without	onal kitchen equipm special approvals.	Ok to Issue:	
Dept: Zoning St. Note: 1) Separate permits shall be 2) This is NOT an approval not limited to items such 3) This property as part of a separate permit application.	required for future decks, sheds for an additional dwelling unit. as stoves, microwaves, refrigera larger PRUD development shal	s, pools, and/or g You SHALL Nators, or kitchen I remain a single	garages. OT add any a dditic sinks, etc. Without	onal kitchen equipm special approvals. Any change of use s	Ok to Issue:	

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.

Location/Address of Construction: /7 Shingle way					
Total Square Footage of Proposed Structure/Area Square Footage of Lot					
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#]	ا مصاد	r, Lessee or Buyer hristina Johnson	_	
376 A032001	Address 17	Shingh.	Tohnson Way	797-3747	
	3.5,, 5.3.6.5	Fordi	nd me oyle	·3	
Lessee/DBA (If Applicable)	Owner (if dif	ferent from	Applicant)	Cost Of Work: \$ 2575	
	Name			C of O Fee: \$ South	
	Address				
	City, State &	Zip		Total Fee: \$ 50	
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision? Project description: Replace Current Dechs & Stans					
		•	z	r	
Contractor's name: Drhdy Con. Address: P.O. Box 146	JAUCTUA.				
City State & Zin / he is he dell and	14600	7	, Т	elenhone: 267:229 (456	
Who should we contact when the remit is read	lv: Ru	Gur	Te	elephone: 267229-5456	
Mailing address: Pa. Ray 14/	iminatu	me	04149	Oinfy_ Constructors	
City, State & Zip 1. minden me 04049 Telephone: 207229-5456 Who should we contact when the permit is ready: Bob Cyr Telephone: 207229-5456 Mailing address: Por Box 146 Limington me 04049 Ointy-Constructors Please submit all of the information outlined on the applicable Checklist. Failure to					
do so will result in the automatic denial of your permit.					
n order to be sure the City fully understands the nay request additional information prior to the issues form and other applications visit the Inspection office, room 315 City Hall or call 874-8703. Thereby certify that I am the Owner of record of the mat I have been authorized by the owner to make this two of this jurisdiction. In addition, if a permit for wo	suance of a per ons Division on armed property, application as he rk described in t	mit. For furt line at www.j or that the ow is/her authori his application	ther information of cortlandmaine.gov, oner of record authorized agent. I agree to it is issued, I certify	or to download copies of or stop by the Inspections orizes the proposed work and to conform to all applicable that the Code Official's	
uthorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour than dry the provisions of the codes applicable to this permit.					
Signature: William C. John	Date	<u>'/</u>	1/2010	MAY 2 0 2009	
This is not a permit; you may	not commene	e ANY woi		it is issue. Of Building Inspections ity of Portland Maine	

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

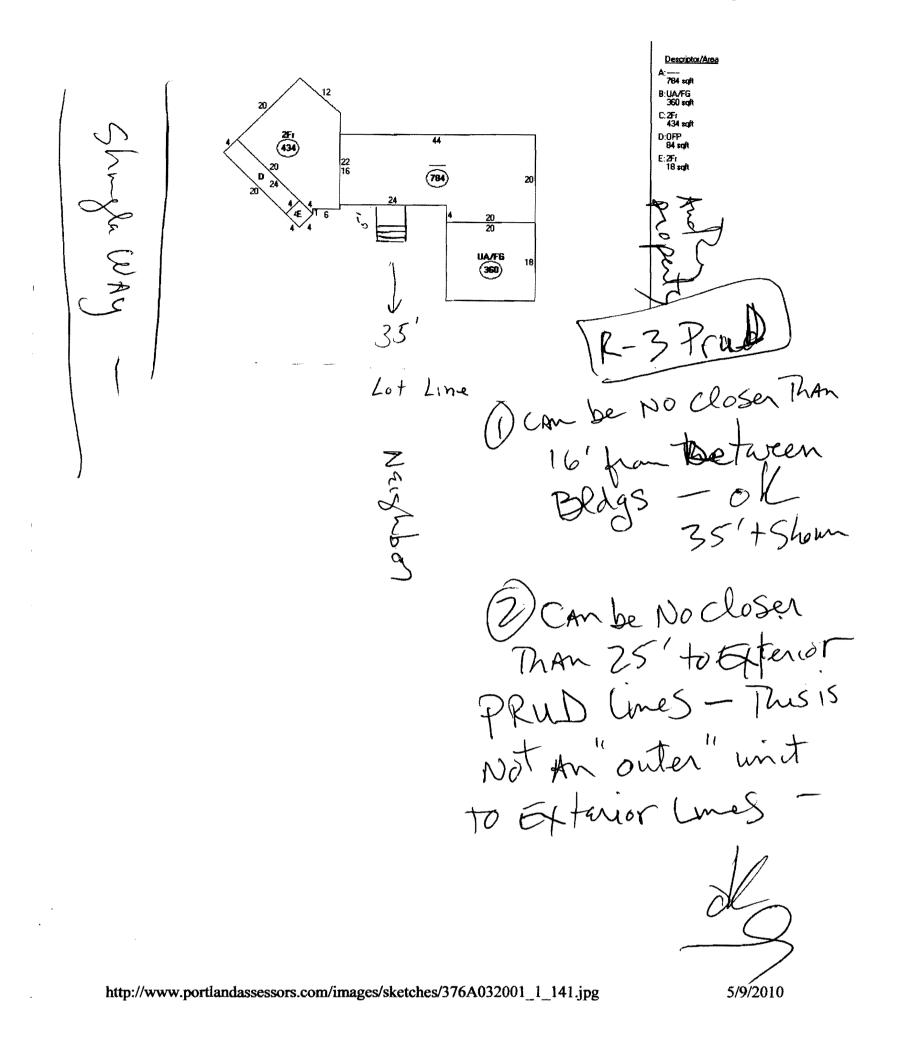
- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.

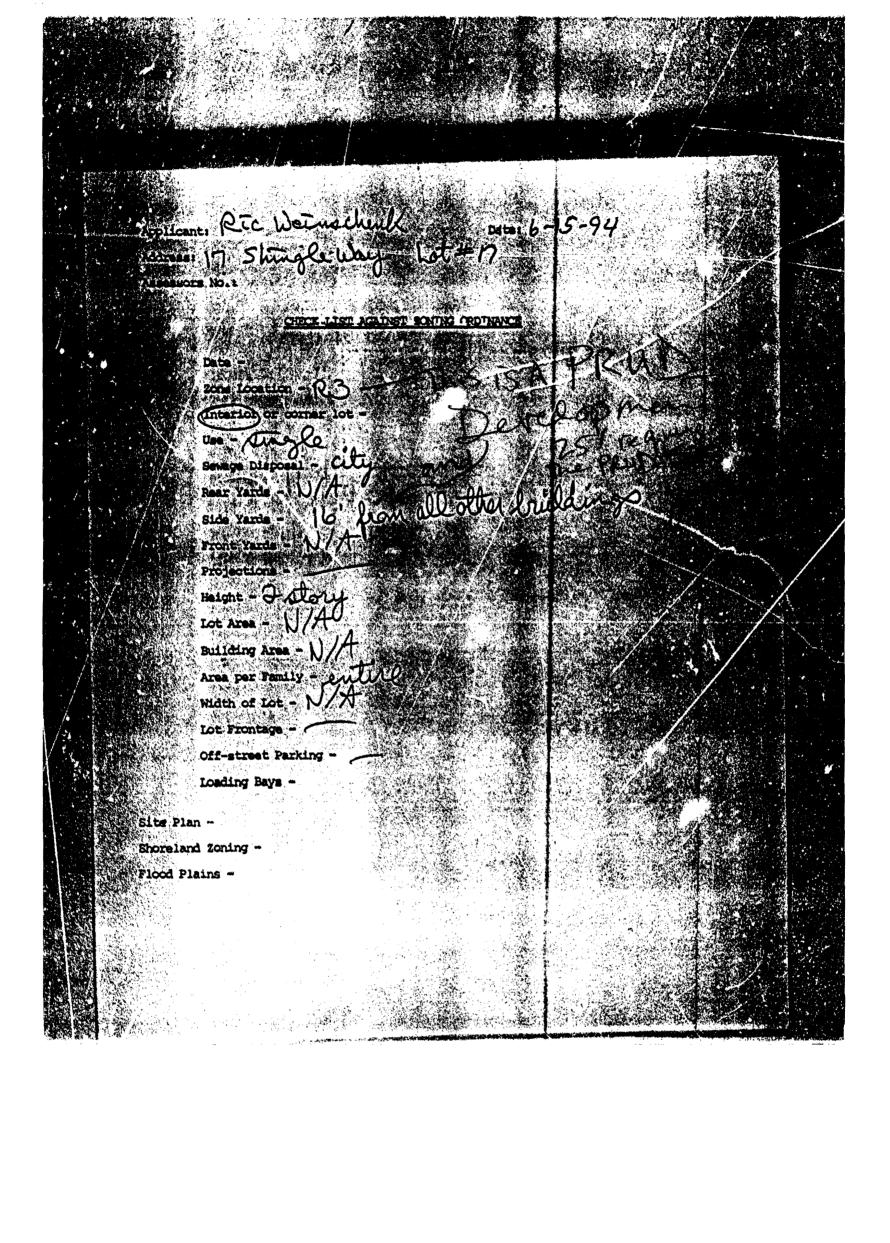
X	Footing/Building Location Inspection: I precast piers	Prior to pouring concrete or setting
X	Framing inspection required.	
X	Final inspection required at completion	of work.

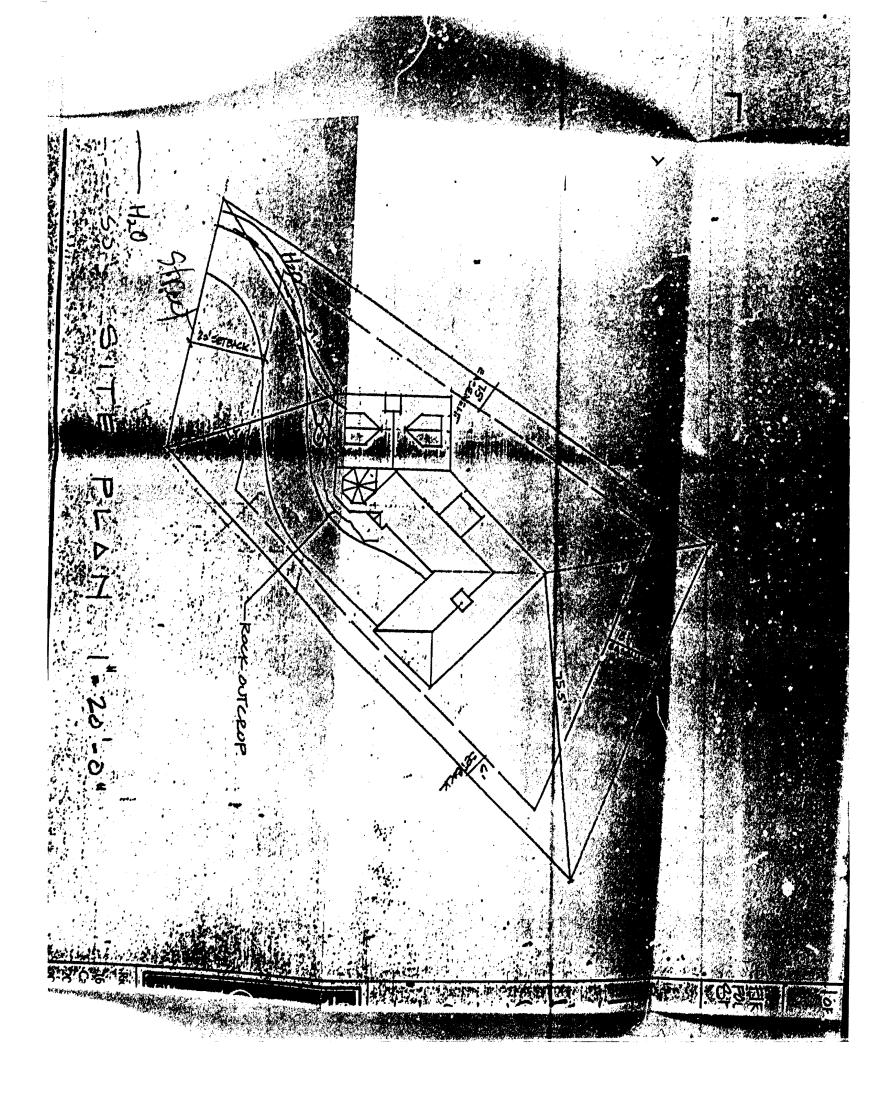
The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

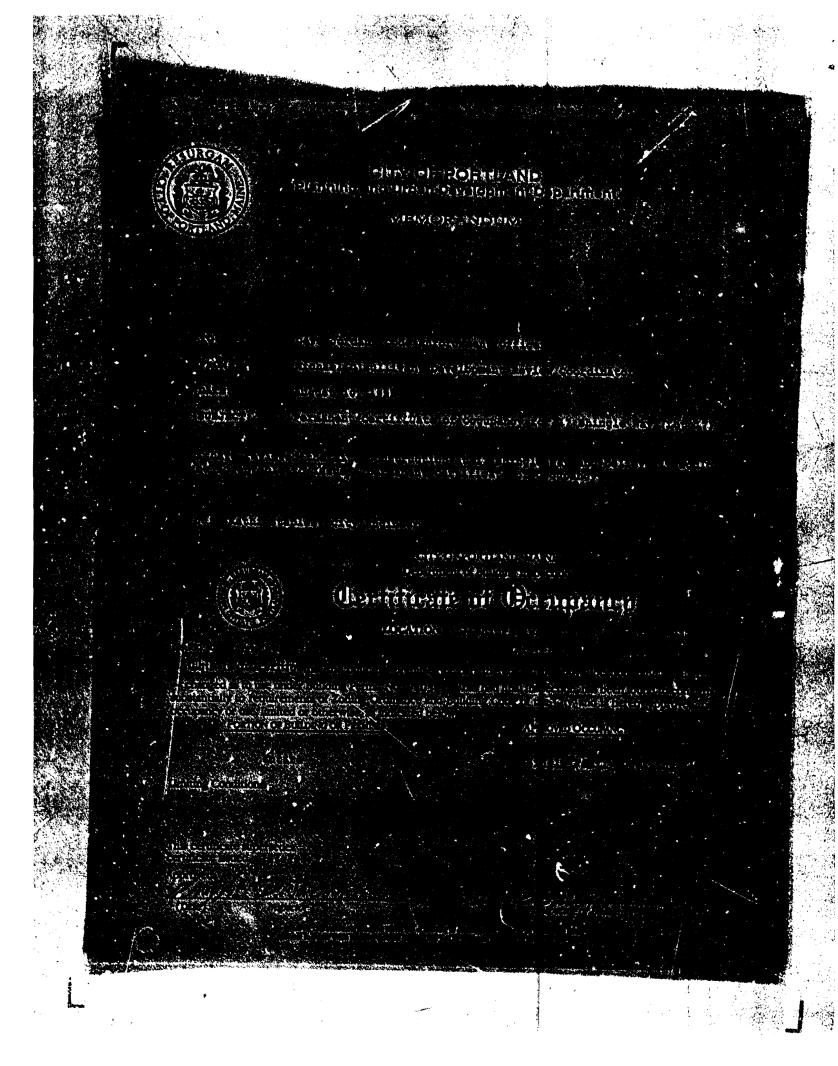
IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

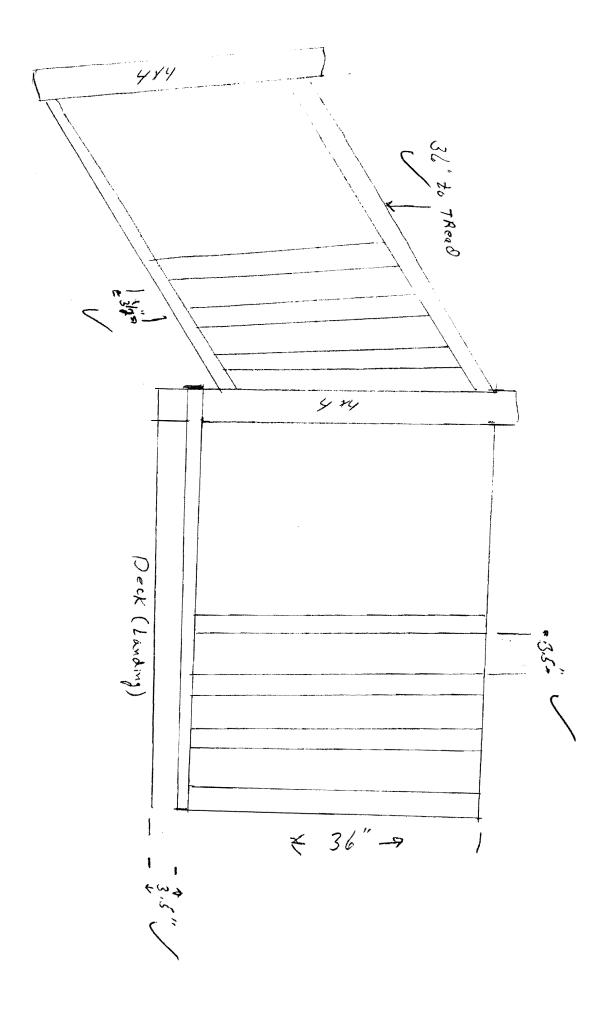
CBL: 376 A032001 **Building Permit #:** 10-0550

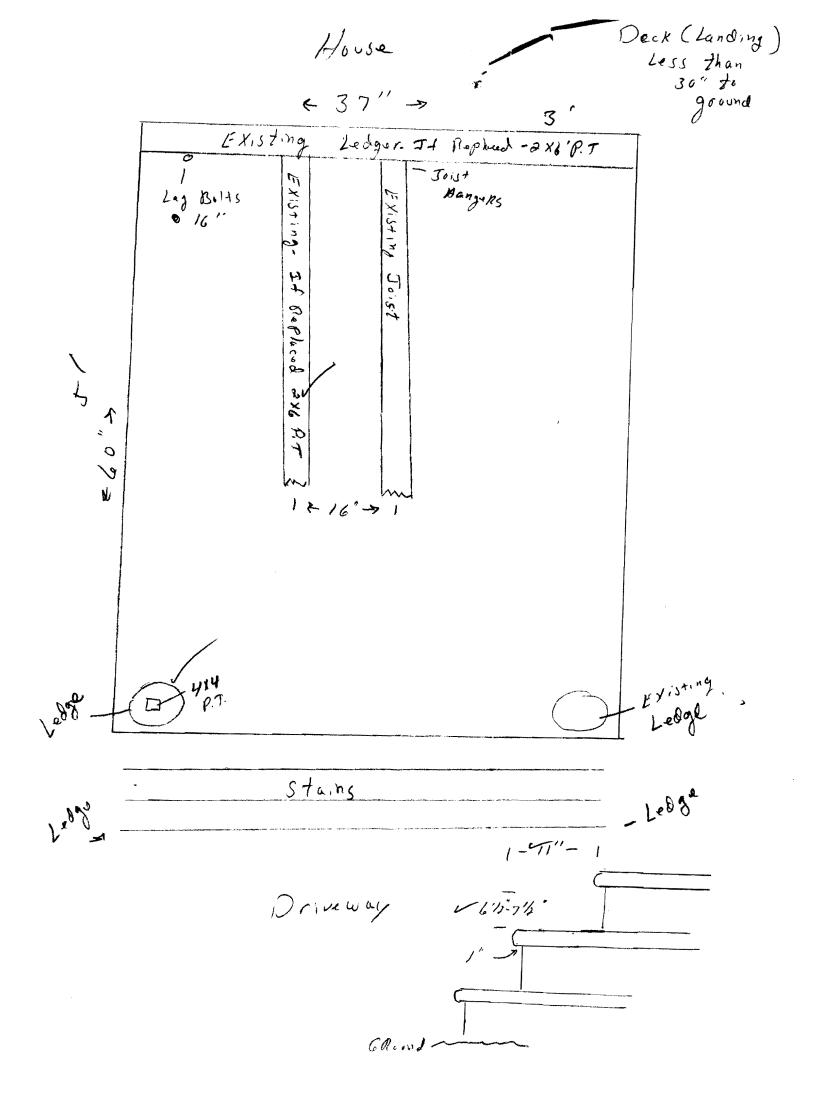








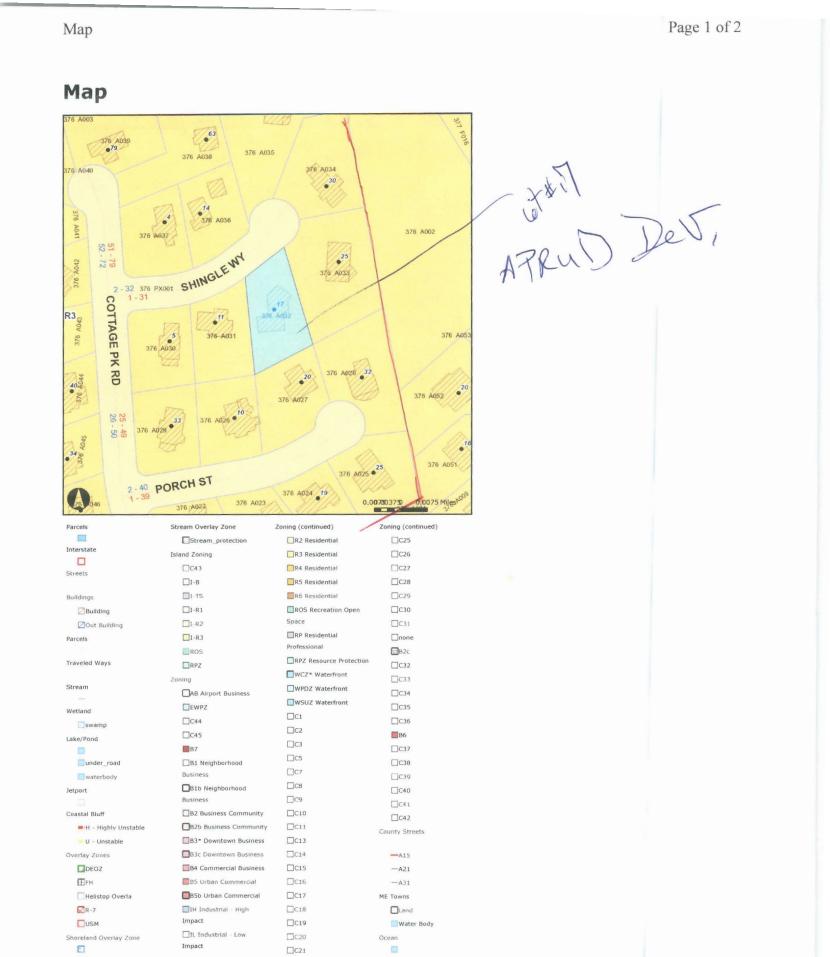






Original Receipt

		5.21	20 /0
Received from	Dicky	S. Br	s. 7.170
Location of Work	175kin	Je ule	
Cost of Construction	<u>\$ 2595 `</u>	Building Fee:	
Permit Fee	\$	Site Fee:	
	Certificate of C	Occupancy Fee: _	
garanta ang		Total:	
Building (II) Plur	nbing (I5) Electr	ical (I2) Site	Plan (U2)
OtherCBL:	<u>9</u> Tot	ai Collected	<u> </u>
Please kee	ep original rec	elpt for you	3



□C22

http://172.16.0.75/aspnet_client/ESRI/WebADF/PrintTaskLayoutTemplates/default.htm

5/24/2010

☐ILb Industrial - Low