

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

PERMIT ISSUED

Permit Number 051760 2005

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION PERMIT

This is to certify that ANDREWS DAVID B & D... CLASS ANDREWS PRO...

has permission to Revert back to single family dwelling

AT 417 AUBURN ST

382 A009001

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and when permission procured before this building or part thereof is leased or closed-in. 4 HOUR NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____

Department Name

Signature and date 12/15/05

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1760	Issue Date: DEC 9 2005	CRF: 382 A009001
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Location of Construction: 417 AUBURN ST	Owner Name: ANDREWS DAVID R & DOUGLA	Owner Address: 417 AUBURN ST	Phone:
Business Name:	Contractor Name: n/a	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Dwellings	Zone: R3

Past Use: Commercial / Bed and Breakfast	Proposed Use: Single Family dwelling	Permit Fee: \$105.00	Cost of Work: \$105.00	CEO District: 5
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FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>R-3</i> Type: <i>5B</i> <i>IRC 2003</i>
Signature:	Signature:

Proposed Project Description:
Revert back to single family dwelling

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	<input type="checkbox"/> Denied
Signature:	Date:

Permit Taken By: dmartin	Date Applied For: 12/06/2005
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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 Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>OK w/conditions</i> Date: <i>12/07/05</i> <i>ABM</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>ABM</i> Date:
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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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1760	Date Applied For: 12/05/2005	CBL: 382 A009001
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Location of Construction: 417 AUBURN ST	Owner Name: ANDREWS DAVID R & DOUGLA	Owner Address: 417 AUBURN ST	Phone:
Business Name:	Contractor Name: n/a	Contractor Address: n/a Portland	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Dwellings	

Proposed Use: Single Family dwelling	Proposed Project Description: Revert back to single family dwelling
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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: <u>417 Auburn St., Portland, Me 04103</u>		Square Footage of Lot
Total Square Footage of Proposed Structure: <u>4246</u>		Square Footage of Lot: <u>1,2 acres</u>
Tax Assessor's Chart, Block & Lot Chart## <u>382</u> Block# <u>A</u> Lot# <u>009</u>	Owner: <u>Douglas Andrews</u>	Telephone: <u>207-797-9157</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Elizabeth Andrews</u> <u>Douglas Andrews</u> <u>417 Auburn St</u> <u>Portland, Me 04103</u> <u>207-797-9157</u>	Cost Of Work: \$ Fee: \$ C of O Fee: \$ <u>105.00</u>
Current Specific use: <u>bed + breakfast</u>	Proposed Specific use: <u>Single Family Home</u>	
Project description: <u>Change of use</u> <u>No work - just not taking in paying guests anymore!</u>		

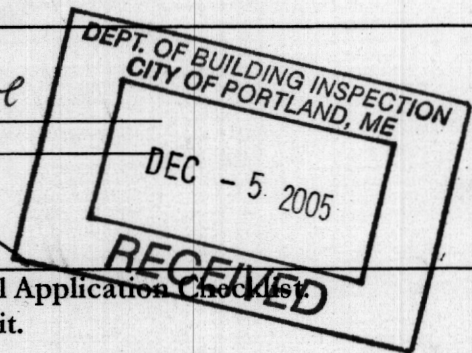
Contractor's name, address & telephone:

Who should we contact when the permit is ready:

Mailing address:

Phone:

None



Please submit all of the information outlined in the Commercial Application 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 www.portlandmaine.gov, stop by the Building Inspections office, room 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 representatives 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:

EA Andrews
Douglas C Andrews *APP*

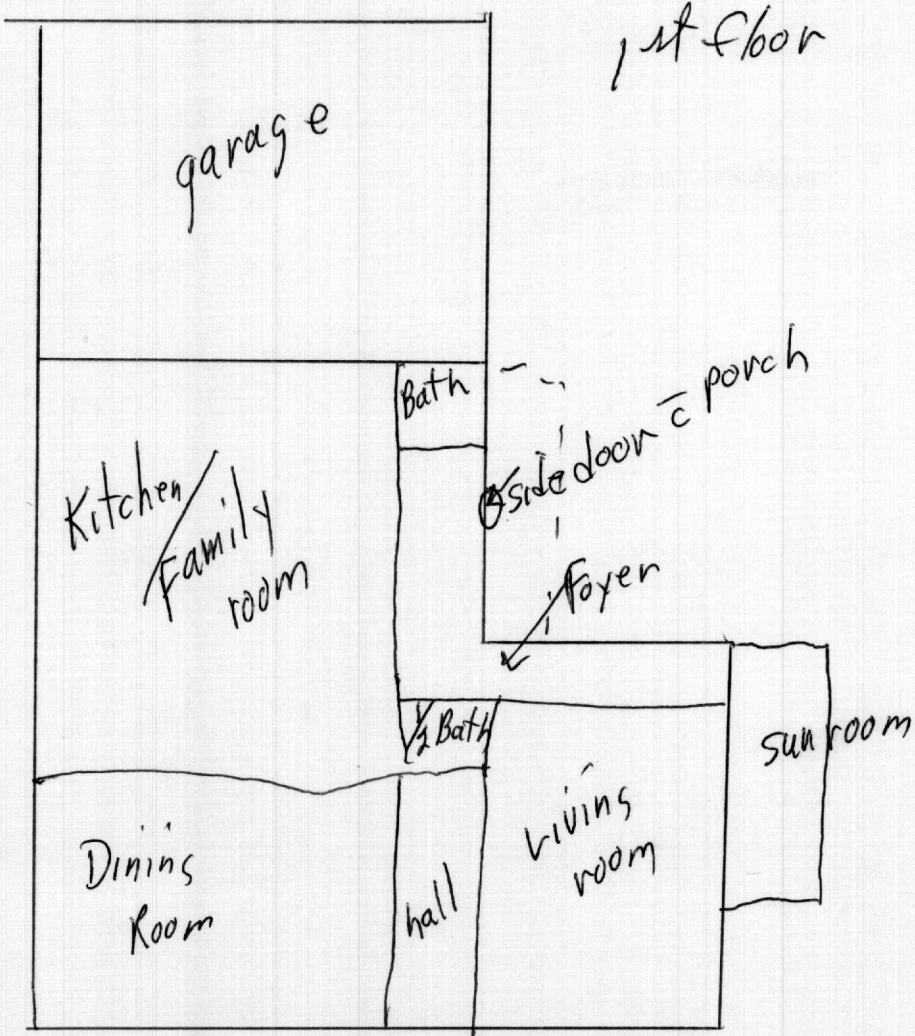
Date:

12/5/05

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

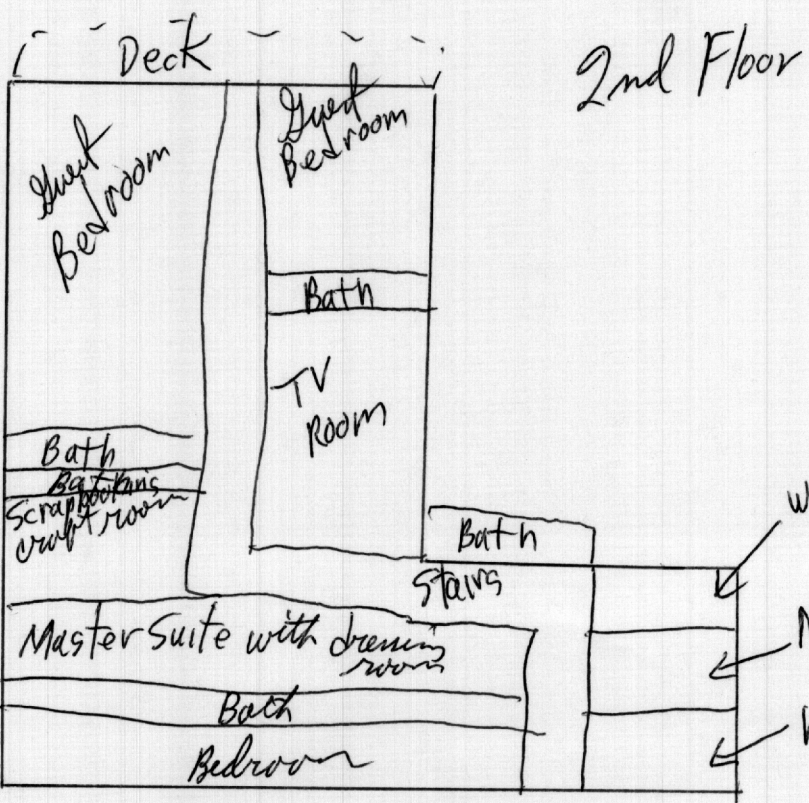
After (Now as of Jan 1, 2006)

Private Home



417 Auburn St.
Portland, Me

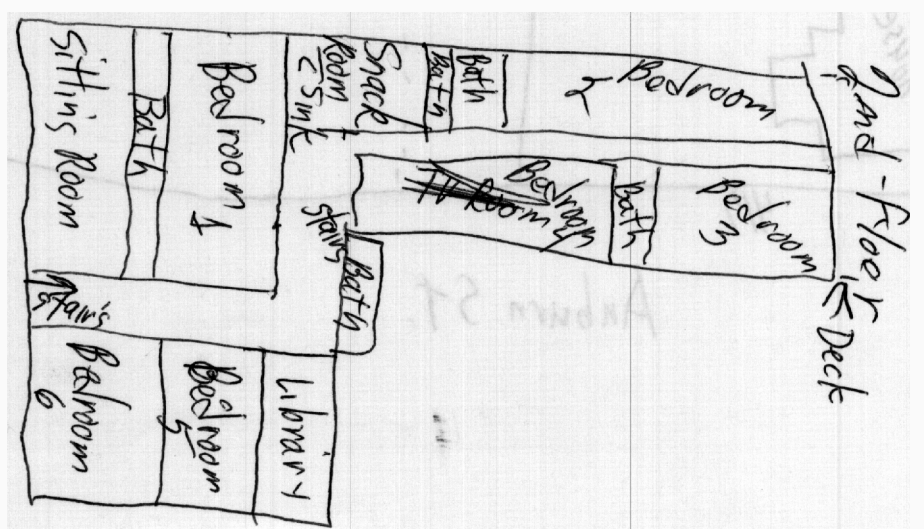
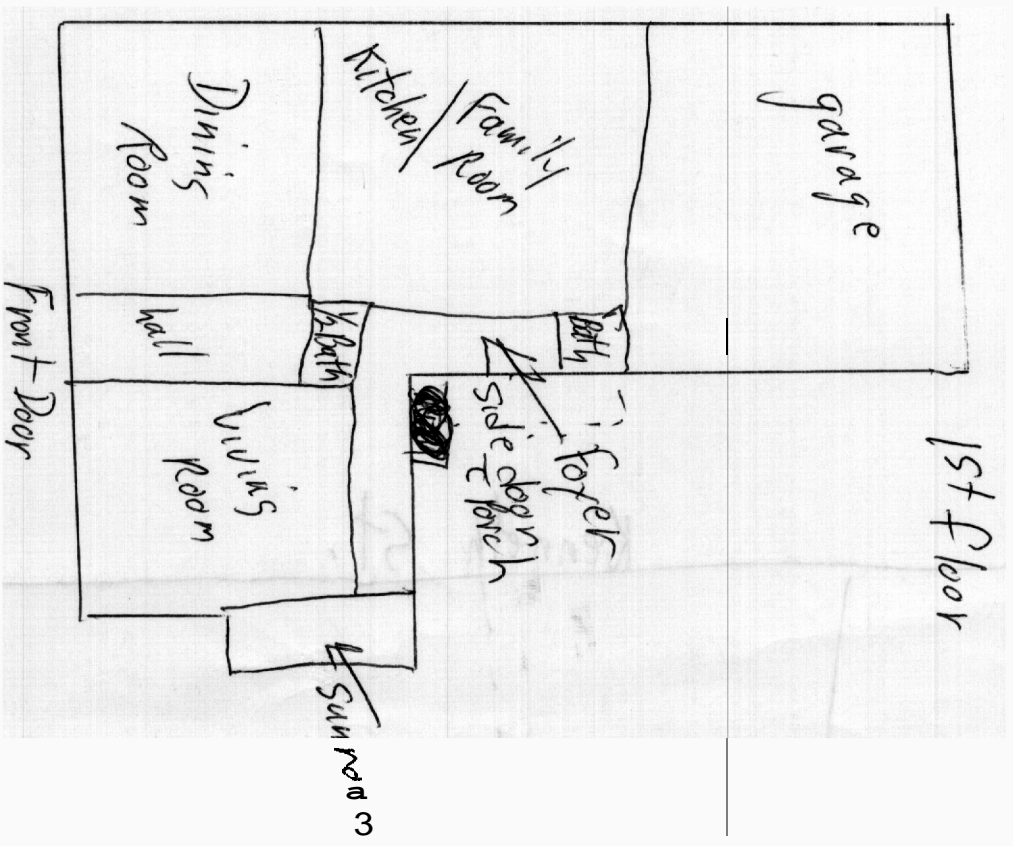
E. Andrews
797-9157



6 1/2 Baths
3 Bedroom
3 other use rooms
that could be
bedrooms
14 rooms (+ baths) total

(we have 3
adult children
with families
now!)

Before - as 6 room Bed + Breakfast (one bedroom used by owner)



417 Auburn St,
 Portland, ME 04103
 E. Andrews
 999-9159

6 Bedrooms
 6 1/2 Baths
 14 rooms (including porch)