

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION

### PERMIT

Permit Number: 071370

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED	
DEC 10	
CITY OF PORTLAND	

This is to certify that ANDREWS DOUGLAS C. ELIZABETH ANDREWS/A Bail

has permission to Change of use to single family with accessory dwelling unit with interior renovation

AT 417 AUBURN ST L 382 A000001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance 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 give and written permission procured before this building or part thereof is laid or occupied. **HOOR 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

*12/10/07* *Clayton M.*  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

# Scanner

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 07-1370	Issue Date: 12/10/07	CBL: 382 A009001
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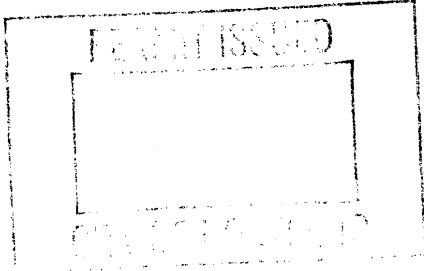
Location of Construction: 417 AUBURN ST	Owner Name: ANDREWS DOUGLAS C & ELIZ	Owner Address: 417 AUBURN ST	Phone:
Business Name:	Contractor Name: N G Bailey INC	Contractor Address: 2 Bailey Dr Gray	Phone 2076573200
Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Dwellings	Zone: R-3

Past Use: Single Family Home	Proposed Use: <del>Two Family</del> Single family w/ accessory dwelling unit.	Permit Fee: \$115.00	Cost of Work: \$1,320.00	CEO District: 5
Proposed Project Description: Change of use to <sup>single</sup> <del>two</del> family with interior renovation.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-2 Type: SB FRL-200?	

Signature:	Signature: 12/10/07 CUM
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
Signature:	Date:

Permit Taken By: lmd	Date Applied For: 11/05/2007	<b>Zoning Approval</b>
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- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input checked="" type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input checked="" type="checkbox"/> Site Plan Exemption 3227-0201	<input checked="" type="checkbox"/> Approved 6-0	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: 12/7/07 ABA	Date: 12/6/07	Date: ABA

**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

Notes

Training Insp - (be-...)

C.K.

AKH

3/21/08 - Final - OK