City of Portland, Maine - I	U			Pe	rmit No: 07-0697	Issue Date	e:	CBL: 388 H00)5001
389 Congress Street, 04101 Tel: (207) 874-8703, F Location of Construction: Owner Name: 80 ABBY LN HALPIN JOHN			Owner Address: 80 ABBY LN			Phone:			
Business Name: Contractor Nam Coastal Const.		ne:		Contr	Contractor Address: 4 King St Portland			Phone 2078786511	
Lessee/Buyer's Name	Phone:			Permit Type: Additions - Dwellings		lings			Zone:
Past Use: Single Family	garage for mas addition to kite	add 2nd floor above ster bedroom & bath, schen & ry way & covered			Approved		00.00 INSPEC		
Proposed Project Description: add 2nd floor above garage for a & mudroom/entry way & covere		th, addi	tion to kitchen	Signa PEDE Actio	STRIAN ACTION Approv	VITIES DIST	oroved w	P.A.D.)	Denied
Permit Taken By: dmartin Date Applied For: 06/12/2007			Zoning Approval						
	Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing,		Special Zone or Reviews Shoreland Wetland		Zoning Appeal Variance			Historic Preservation Not in District or Landr	
2. Building permits do not include septic or electrical work.					Miscellaneou			Does Not Require Revie	
3. Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Flood Zon			Conditional Us			Requires Review	
False information may invalidate a building permit and stop all work			Subdivision		Interpretati			Approved	
		☐ Si	te Plan		Approve	ed		Approved w	/Condition
		Ma [Mino M		☐ Denied			Denied	
		Date:			Date:		Da	nte:	
I hereby certify that I am the own I have been authorized by the own jurisdiction. In addition, if a period shall have the authority to enter a to such permit.	ner to make this appli mit for work described	med proication a	as his authorized application is iss	ne prop d agen sued, I	t and I agree to certify that th	o conform t e code offic	o all ap _l cial's aut	plicable laws of thorized repres	of this sentative
SIGNATURE OF APPLICAN			ADDRES	S		DATE	,	P	НО

Location of Construction: 80 ABBY LN	Owner Name: HALPIN JOHN P & SARA	Owner Address: AH J JTS 80 ABBY LN		
Business Name:	Contractor Name: Coastal Construction	Contractor Address: 4 King St Portland	Phone 2078786511	
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	**	

Dept:	Zoning	Status:	Approved with Conditions	Reviewer:	Ann Machado	Approval Date: 06/1	8/2007
Note:						Ok to Issue:	

- 1) As discussed during the review process, the property must be clearly identified prior to pouring concrete and compliance with the required setbacks must be established. Due to the proximity of the setbacks of the proposed addition, it may be required to be located by a surveyor.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 3) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

 Dept:
 Building
 Status:
 Approved with Conditions
 Reviewer:
 Tom Markley
 Approval Date:
 07/10/2007

 Note:
 Ok to Issue:
 ✓

- 1) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.
- 2) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.
- 3) Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every level.

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	РНО	