City of Portland, Ma	Permit No:	Issue Date:	CBL:						
389 Congress Street, 04	101 Tel: (207)	874-8703	, Fax: (207) 874-871	6 10-0928		388A A	026001	
Location of Construction: Owner Name:				Owner Address:	Phone:				
19 OLD BARN LN CARON JAIM			EYR&	DENISE M	19 OLD BARN	LN			
Business Name: Contractor Name		:		Contractor Address	:	Phone			
property owner		<u> </u>	r					T=	
Lessee/Buyer's Name Phone:				Permit Type: Sheds			Zone:		
Past Use: Proposed Use:					Permit Fec:	Cost of Work:	CEO District:	$\sqrt{0,20}$	
Single Family Home		single Family Home I2' Shed		nstall a 8' x	T TAPPIOYCU		SPECTION: c Group: U	Type: 57	
Proposed Project Description:						<i>ד</i> י ו	10		
install a 8' x 12' Shed					Signature:	Sig	mature:		
					PEDESTRIAN ACT	TIVITIES DISTRIC	T (P.A.D)	$\overline{}$	
					Action: Appro	oved Approve	ed w/Conditions	Denied	
					Signature:		Date:		
Permit Taken By:	Date Applied	For:		<u>. </u>	Zoning Approval				
ldobson	07/29/201	0							
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 			Special Zone or Reviews Shoreland			Zoning Appeal Variance		Historic Preservation Not in District or Landmark	
2. Building permits do n septic or electrical wo		bing,	Wetland		☐ Miscel	Miscellaneous		Does Not Require Review	
3. Building permits are	void if work is n		☐ Ftood Zonc		Condi	☐ Conditional Use		Requires Review	
False information mapermit and stop a	y invalidate a bu	ilding	Subdivision		[Interpretation		Approved		
		OLD	Site Plan		Approved		Approved w/Conditions		
A	UG 1 9 2010		Mai Minot MM		Denied		Denied		
Cit	y of Portland	ļ	Date:		Date:		Date:		
				219/10					
			C	ERTIFICATI	ON				
I hereby certify that I am the I have been authorized by a jurisdiction. In addition, it shall have the authority to a such permit.	the owner to male a permit for wo	ke this appli rk described	ication a d in the a	s his authorized application is is	l agent and I agreessued, I certify tha	to conform to a the code officia	ll applicable laws il's authorized rep	of this resentative	

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

SIGNATURE OF APPLICANT

ADDRESS

DATE

PHONE

DA

DATE

PHONE

Form	ø	Р	0
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DISPLAY IHIS CAHD UN PRINCIPAL INCINIAGE C.

Please Read Application And Notes, If Any, Attached

This is to certify that

CITY OF PORTLAND

BURNER

PERMIT ISSUED

Permit Number: 100928

Ting this permit shall comply with all

ices of the City of Portland regulating

gres, and of the application on file in

AUG 1 9 2010

	CHARGITATIAN AND A RECORD DELIGIO	2 02 1244	2011) 0			
has permission to	install a 8' x 12' Shed				Our of Bortland	
,					City of Portland	
AT _19 OLD BARN LN	L		 — CF	388A A026001		

and of the

or co

buildings and stru

provided that the person or persons, fit of the provisions of the Statutes of Mathe construction, maintenance and use this department.

CARON LAIMEY R & DENIS

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

OTHER REQUIRED APPROVALS

Noti ltion of spectio nust be d writte give ermissid rocured befo his buil g or pa hereof is or oth lath NOTICE IS REQUIRED. HOU

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

Directo - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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.

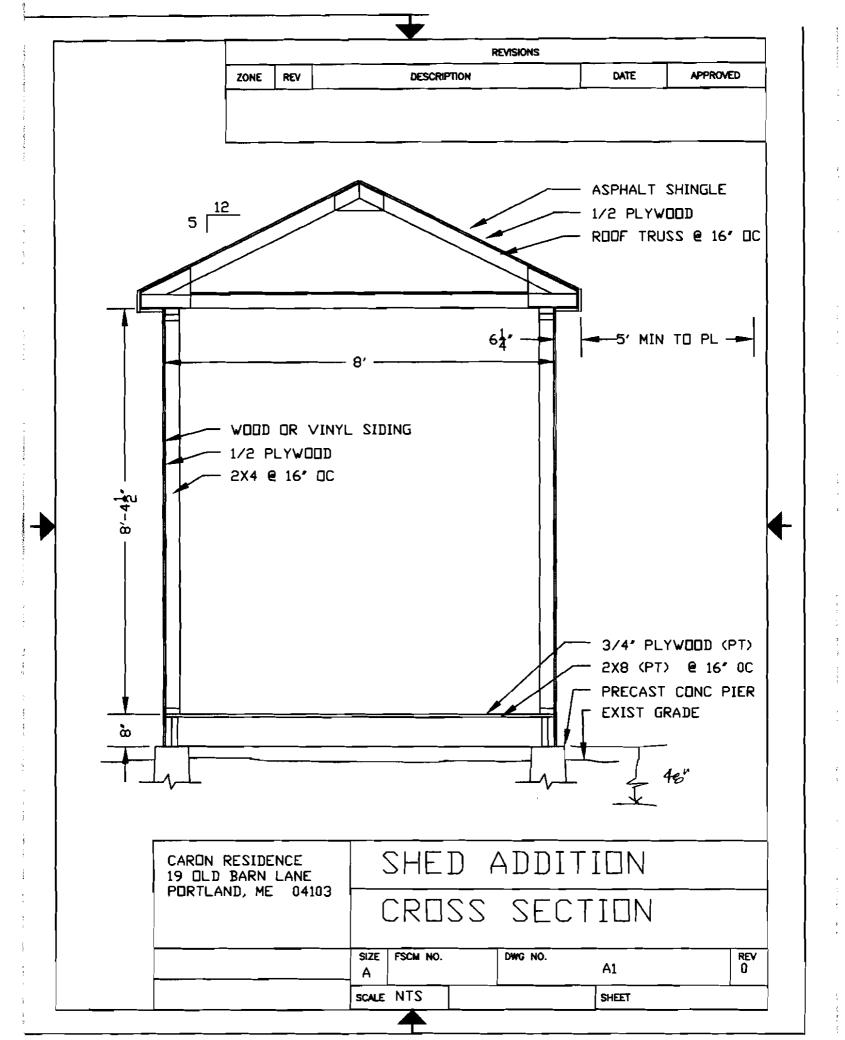
Location/Address of Construction: 19 OL	D BARA	LANG				
Total Square Footage of Proposed Structure/As		Square Footage of Lot Number of Stories				
+/- 96 SF (BXIZ SHE	30)	10,269 55				
Tax Assessor's Chart, Block & Lot	Applicant *mu	st be owner, Lessee or Bu	rer*	Telephone:		
Chart# Block# Lot#	Applicant *must be owner, Lessee or Buyer* Telephone: Name Jamey CARON 1 878-09			878-0942		
398A A Z6	Name JAMEY CARON 1 878-0942 Address 19 OLD BARN LANE Mail					
·	City, State & Z	Cip PORTLAND, ME E	463			
Lessee/DBA (If Applicable)	Owner (if diffe	erent from Applicant)		ost Of		
NA	Name	NA	W	ork: \$ \[\frac{5}{0}, \text{O} \]		
	Address		C	of O Fee: \$		
	City, State & Z	z Zip Total Fee: \$ <u>↓0.€</u>				
Current legal use (i.e. single family) Single	Current legal use (i.e. single family) Single Family Number of Residential Units					
If vacant, what was the previous user	<u></u>					
Proposed Specific use: SHEO STOKES Is property part of a subdivision? NO	u <u>e</u> If m	es plessa pama				
Project description:	11 y			-		
BXIZ 5H80 RECEIVED						
Contractor's name: Construction by Proporty Owner JUL 2 9 2010						
Address:						
City, State & Zip						
Who should we contact when the permit is read	y :	City of Po	rtland Telepi	Maine none:		
Mailing address:			_			
Please submit all of the information outlined on the applicable Checklist. Failure to						

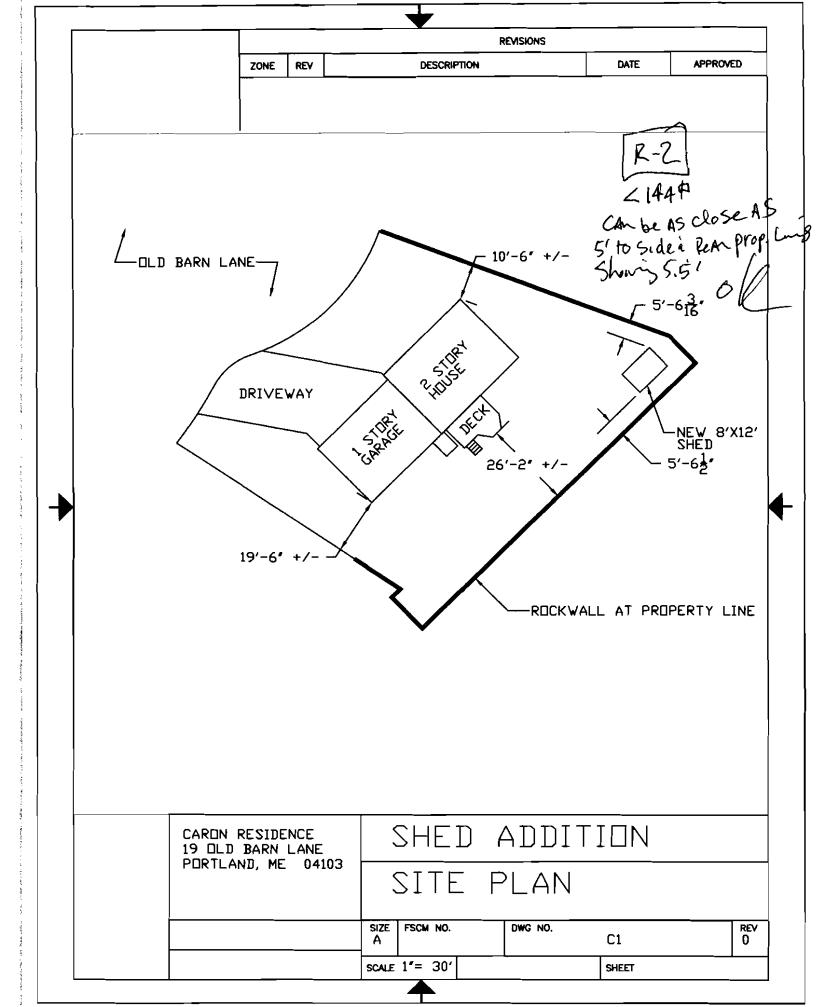
Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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 or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division 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 representative 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.

providents of the contes applicable to trasperating								
Signature			4	Date.	7	29	10	
	This is	not a p	ermit; you may	not commence A	NY	work	c until the permit is issued	





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.

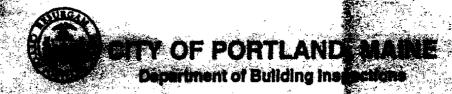
X	Building Location Inspection: Prior to pouring concrete or setting precast piers
X	Final inspection required at completion of work.

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: 388A A026001 Building Permit #: 10-0928

City of Portland, I 389 Congress Street,	-	Permit No: 10-0928	Date Applied For: 07/29/2010	CBL: 388A A026001		
Location of Construction: Owner Name: O				Owner Address: Phone: 19 OLD BARN LN		
19 OLD BARN LN CARON JAIMEY R & DENISE M 1						
Business Name:		Contractor Name: (property owner		Contractor Address:	Phone	
Lessee/Buyer's Name		Phone:		Permit Type: Sheds		
Proposed Use: single Family Home -	install a 8' x	12' Shed		ed Project Description		
Dept: Zoning Note:	Status:	Approved	Reviewe	: Marge Schmuck	al Approval	Date: 08/09/2010 Ok to Issue: ✓
Dept: Building Note:	Status:	Approved	Reviewer	: Residential Plan	Revie Approval	Date: Ok to Issue:



Original Receipt

	X
Received from Source	X Can
Location of Work To, (N.)	Par Line
Cost of Construction \$	Building Bar
Permit Fee \$Cortificate	of Occupancy Fee
	Tolge
Building (IL) Plumbing (15) El	ectrical (I2) Sile Plan (U2)
OBL 388 A A036	
Check #: VLLC	otal Collected s 40.0
No work is to be star	led until permit issued
and the same of th	ecelpt for your records.
Taken by: Tuylo	
WHITE - Applicant's Copy YELLOW - Office Copy	
PINK - Permit Copy	To the second se