Cit	y of Portland, Maine	e - Build	ling or Use Pe	ermit A	Application	P	Permit No:	Issue Dat	e:	CBL:		
389	Congress Street, 04101	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		04-0798			408 D00	3001	
Location of Construction: Owner Name:				C		Owner Address:			Phone:			
1179 Washington Ave Russell M			Russell Martha	na A		1179 Washington Ave				797-0678		
Business Name: Contracto				Jame:		Contractor Address:				Phone		
Owner			Owner			1179 Washington Ave Portland			nd	2077970678		
Lessee/Buyer's Name Phone:						Permit Type:					Zone:	
						Ac	dditions - Mul	ti Family				
Past	t Use:		Proposed Use:			Permit Fee: Cost of Work		rk:	CEO District:			
2 u	nit multifamily		2 unit multifam	2 unit multifamily		\$156.00		\$15,0	00.00	4		
						FIRE DEPT:		Approved	INSPE	PECTION:		
								Denied	Use G	Use Group: Typ		
							•					
	posed Project Description:											
15':	x21' kitchen & loft additio	n w/bath				Signature:		Signature:				
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (CT (P.A.D.)		
					Act		tion: Appr	oved Ap	proved w	//Condition	Denied	
						G.				Date		
	*/ TD 1	Б	1. 1.5	<u> </u>		Sigi	nature:			Date:		
	mit Taken By:		pplied For:				Zonin	g Approva	1			
jodinea 06/14/2				Special Zone or Review		owe	vs Zoning Appeal			Historic Preservation		
1.	1 11			Shoreland		c w s	_			1 _		
Applicant(s) from meeting applicable Sta Federal Rules.		cable State and	Variance				Not in District or Landm					
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			☐ Does Not Require Revie			
3.	3. Building permits are void if work is not started			Flood Zon			Conditional Us			Requires Review		
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work				Subdivision		☐ Interp	☐ Interpretatio		Approved			
•			Site Plan			Approved			Approved w/Condition			
				Maj [Maj Minor MM		☐ Denied		☐ Denied			
				Date:	Date:		Date:		D	Date:		
I ha juris shal	reby certify that I am the ve been authorized by the sdiction. In addition, if a Il have the authority to en uch permit.	owner to permit for	o make this appli r work described	med procession a	as his authorized application is iss	e pro l age ued,	ent and I agree I certify that	to conform the code offi	to all ap	oplicable laws of thorized representations of the control of the c	of this sentative	
CIC	NATURE OF ARRUGAN				ADDRESS	,		To A mor	7	т.		
SIG	GNATURE OF APPLICAN				ADDRESS	•		DATI	2	Ρ.	НО	

Location of Construction: Owner Name:		Owner Address:	Phone:	
1179 Washington Ave	Russell Martha A	1179 Washington Ave	797-0678	
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Owner	1179 Washington Ave Portland	2077970678	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
		Additions - Multi Family		

 Dept:
 Zoning
 Status:
 Approved
 Reviewer:
 Jeanine Bourke
 Approval Date:
 06/24/2004

 Note:
 Ok to Issue:
 ✓

1) This property shall remain a two family dwelling. Any change of use shall require a separate permit application for review and approval. ***NOTE*** THE CURRENT OWNER DOES NOT USE THE ACCESSORY HOME OCCUPATION APPROVAL GRANTED 3/22/99. THIS PROPERTY IS STILL A LEGAL TWO FAMILY.

 Dept:
 Building
 Status:
 Approved with Conditions
 Reviewer:
 Jeanine Bourke
 Approval Date:
 06/24/2004

 Note:
 Image: Note of the Issue:
 Image: Note of Issue:

- 1) The design load spec sheet for the engineered beam(s) must be submitted to this office. The design of the spiral stairway must be submitted to this office.
- 2) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 3) Separate permits are required for any electrical, plumbing, or heating.
- 4) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approrval prior to work.

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.

PERDONALDI E DEDGON IN CHA DOE OF WORK WIT		DATE	DITO
SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО