

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

PERMIT ISSUED

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION PERMIT

Permit Number: 060922006

This is to certify that NOVOTNY DENISE M / McDonald Co has permission to Lift right front corner of foundation stable foundation - KCMANAPUS + EVACUATION ONLY AT 29 SUMMER PL L 422 B049001

provided that the person or persons firm or corporation accepting 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, 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 be given and when permission procured before this building or part thereof is loaded or closed-in. 24 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 DepartmentName

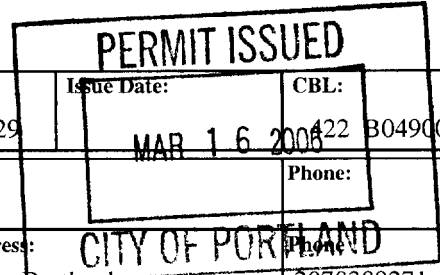
Signature of Director - Building & Inspection Services dated 3/16/06

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: 06-0329	Issue Date: MAR 16 2006	CBL: B049001
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Location of Construction: 29 SUMMER PL	Owner Name: NOVOTNY DENISE M	Owner Address: 75 B ST #B	Phone:
Business Name:	Contractor Name: McDonald Corp	Contractor Address: 440 Forest Ave Portland	Phone: 2078389271
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	Zone:

Past Use: Single Family Home	Proposed Use: Single Family Home/ Lift right front corner of foundation stabilize foundation	\$66.00	\$5,000.00	4
Proposed Project Description: Lift right front corner of foundation stabilize foundation		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: EXCAVATION & EVALUATION Type: 3/15/06 Signature: <i>[Signature]</i>
		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: ldobson	Date Applied For: 03/10/2006	Zoning Approval	
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2. Building permits do not include plumbing, septic or electrical work. 3. 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 <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"/> late: _____	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 >ate: _____	Historic Preservation <input 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 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: 06-0329	Date Applied For: 03/10/2006	CBL: 422 B049001
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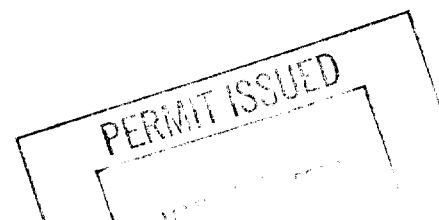
Location of Construction: 29 SUMMER PL	Owner Name: NOVOTNY DENISE M	Owner Address: 75 B ST #B	Phone:
Business Name:	Contractor Name: McDonald Corp	Contractor Address: 440 Forest Ave Portland	Phone (207) 838-9271
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Dwellings	

Proposed Use: Single Family Home/ Lift right front corner of foundation stabilize foundation	Proposed Project Description: Lift right front corner of foundation stabilize foundation
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Dept: Building **Status:** Approved with Conditions **Reviewer:** Mike Nugent **Approval Date:** 03/15/2006

Note: **Ok to Issue:**

1) Permit limited to excavation and evaluation only, repair plans must be submitted and approved prior to construction or repair.





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>29 SUMMERS PLACE</u>		
Total Square Footage of Proposed Structure <u>N/A</u>	Square Footage of Lot <u>N/A</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>422 49 19</u>	Owner: <u>HARNANGED, LLC</u>	Telephone: <u>207-838-9271</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>HARNANGED, LLC ATTN: DAVID McDONALD 440 FOREST AVE PORTLAND, ME 04101</u>	Cost Of Work: <u>5000</u> Fee: \$ _____ C of O Fee: <u>666</u>
Current Specific use: <u>RESIDENTIAL</u>	<u>SINGLE - FAMILY (EXISTING)</u>	
If vacant, what was the previous user?		
Proposed Specific use: <u>RESIDENTIAL</u>	<u>SINGLE - FAMILY</u>	
Project description: <u>HYDRAULICLY LIFT RIGHT FRONT CORNER. REMOVE EXISTING BACKFILL TO EXPOSE FOUNDATION. LEVEL BUILDING & SET ON TOP OF EXISTING FOUNDATION. STRUCTURALLY STABILIZE FOUNDATION (3) CRACKS/FOOTING.</u>		
Contractor's name, address & telephone: <u>DL McDONALD CORP. 440 FOREST AVE PORTLAND, ME</u>		
Who should we contact when the permit is ready: <u>DAVID L. McDONALD</u>		
Mailing address: <u>DLM CORP. 440 FOREST AVE. PORTLAND, ME 04101</u>	Phone: <u>207-838-9271</u>	<u>04101</u>

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 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.

Signature of applicant: David L. McDonald Date: 3/10/06

DAVID L. McDONALD, PRESIDENT
DLM CORP.

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

