Form # P 04 DISPLAY TH		NCIPAL FRONTAGE	OF WORK
Please Read	CITY OF P		PERMIT ISSUED
Application And Notes, If Any, Attached		NSPECTION Permi	t Numbec4250 2004
	ies li Lle /Richa P. Waltz		
has permission toreplace 3' of			CITY OF PORTLAND
	Sintana 15 oca	428, 0005001	
^{AT} - 549 Washington Ave provided that the person	or persons rm or	hion are epting this pe	rmit shall comply with all
of the provisions of the S the construction, mainter this department.	statutes of the line and or	the Originances of the C	ity of Portland regulating f the application on file in
Apply to Public Works for stree and grade if nature of work ree such information.	et line g n and ween p quires t pre this Idin	g or art there is procu	tificate of occupancy must be ired by owner before this build- part thereof is occupied.
OTHER REQUIRED APPROV			~ , .
Fire Dept Health Dept			1/ 10/04
Appeal Board		1m	- HA 1911 -
Other Department Name		V	or - Building & Inspection Services

		Permit					
				1	yal etaa 1,- gaa		
Location of Construction:	Owner Name:		Owner	Address:		Phone	:
549 Washington Ave	Mlw Propertie	s Ii Llc	72 Fe	licia Ln	UEC 202	2004	
Business Name:	Contractor Name	Contractor Name:		ctor Address		Phone	
	Richard P. Wa	Richard P. Waltz		resumpsco	ITY OF PORT		722801
Lessee/Buyer's Name	Phone:			Type: U rations - Dw		ILAND	Zone:
Past Use:	Proposed Use:	Proposed Use:		t Fee:	Cost of Work:	CEO Distr	ict:
Residential 2 units Residential 2 units replacing rotted		inits replacing rotted		\$39.00	\$1,500.00) 4)
	sill and beam	sill and beam			Denied	Group R-C	3 _{Туре} 2 <i>2003</i>
'roposed Project Description:				N/I		\sim	
replace 3' of sill and 13' beam			Signature: I RSIGHALD.			X	
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
			Action	: Appro	oved Approved	l w/Conditions	Denied
			Signati	ure:		Date:	<u> </u>
'ermit Taken By:	Date Applied For:			Zoning Approval			
dmartin	11/29/2004			7		1	
		Special Zone or Revie	ews	Zon	ing Appeal		Treservation
		Shoreland		Variano	ce	Not in I	District or Landmark
		Wetland		Miscell	laneous	Does N	ot Require Review
		🗌 Flood Zone		Conditi	ional Use	Require	es Review
		Subdivision		Interpre	etation	Approv	ed
		Site Plan		Approv	ved	Approv	ed w/Conditions
		Maj 🗌 Minor 🗌 MM		Denied		Denied	11.
		Date: 12 17/04		Date:		Date: 12	117/04
						/	/

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



Total Square Footage of Proposed Structure		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot	Owner: 🌾	CICHARD P. WALTZ JR	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant n Richar 179 M Portlar	ame, address & telephone: DP. WALTZ JR. SESUMPSCOT ST. DD, ME 04040	Cost Of Work: \$ <u>/500. –</u> Fee: \$ 3 9.00

Current Specific use: <u>2</u> FAMLLY

Proposed Specific use: <u>SAME</u>

Project description: WHEN WE REMOVED THE ENTRY DOOR TO REPLACE IT WE NOTICED 3' OF THE SILL WAS ROTTEN. WE INTEND TO REPLACE THE 3' OF G"*G" SILL WITH PRESURE TREATED MATERIALS. ALSO A 13' BEAM WAS SOFT. WE INTEND TO REPLACE THAT WITH TRIPPLE 2" × 8" SPRUCE WITH APPROPRIATE JOIST HANGERS.

Contractor's name, address & telephone: RICHARD P. WALTZ PLUMBING ; HEATING 179 RESUMPSCOT ST. 772 - 2801 Who should we contact when the permit is ready: PAUL J. MATTSON 807-6638 Mailing address:

Phone: 807-6638

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

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information 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.

accus covered by any permit a any reasonable not to emote and provisions of the codes a	ppicable to any permit.
Signature of applicant:	Date: //- 22-09_
SENIOR PROTECT MANAGER Permit Fee: \$30.00 for the first \$1000.00 Construction Cos	s <i>t</i> , \$9.00 per additional \$1000.00 cost
This is not a Permit; you may not commence any wo	rk unt Pho Rermit is issued.

