Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PECTION

propert

This is to certify that ____ANDREWS HELEN DALL /Home

has permission to ______install a 8' x 12' Shed in rea

AT 2 CHESTER ST

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

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

epting this permit shall comply with all rm or tion a cances of the City of Portland regulating ine and of the ctures, and of the application on file in of buildings and

431 C018b01

Permit Number: 0

NOV

fication inspe n mus h and w en permi on proci re this ding or t there ed or osed-in JR NOTHOL IS MEQUIRED.

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 _

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine	e - Building or Use	Permi	t Applicatio	n Permit No:	Issue Date:	CBL:		
389 Congress Street, 04101	_					431 (C018001	
Location of Construction:	Owner Name:			Owner Address:		Phone:	Phone:	
2 CHESTER ST	ANDREWS H	ANDREWS HELEN DALLAS		PO BOX 178				
Business Name:	Contractor Name	Contractor Name: Home Owner		Contractor Address	:	Phone	_	
	Home Owner							
Lessee/Buyer's Name	Phone:	Phone:		Permit Type:			Zone:	
				Sheds			1.6-2	
Past Use: Proposed Use:				Permit Fee: Cost of Work: CEO Di			:	
Single Family home Single Famil		Home - install a 8' x		\$30.00	\$1,000	0.00 4		
	12' Shed in rea	12' Shed in rear of property		FIRE DEPT:	Approveu	NSPECTION: Use Group: R - 3/L		
] //		Thy Ord	mane	
Proposed Project Description:					/	1		
install a 8' x 12' Shed in rear	of property			Signature: /		Signature:	<u> </u>	
				PEDESTRIAN ACT	TIVITIES DISTR	RICT (P.A.D.)	CT (P.A.D.)	
				Action: Appro	oved Appro	oved w/Conditions	Denied	
				Signature:		Date:		
Permit Taken By:	Date Applied For:			Zoning Approval				
ldobson	11/07/2007	Sne	Special Zone or Reviews Zoning Appeal		ing Anneal	Historie	reservation	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland Well begand 75 h		MAKarian	1 MA STATE OF THE		Not in District or Landma	
		We	il beyond	15 HIVE VAIIAII	CC	I NOT III DIS	trict of Landina	
2. Building permits do not include plumbing, septic or electrical work.		Wetland /		Miscell	Miscellaneous		Does Not Require Review	
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		☐ Flood Zone ☐ Subdivision		☐ Condit	Conditional Use		Requires Review	
				_ Interpre	☐ Interpretation		Approved	
		Sit	e Plan	_ Approv	/ed	Approved	w/Conditions	
			☐ Millor ☐ MM	Denied	Denied		Denied /	
PERMIT ISQUED			Date: 117106		Date:		Date: 11/7/08	
NOV 7	2007 ETTLAND	C	ERTIFICATI	ON		<i>,</i> /		
I hereby certify that I am the of I have been authorized by the jurisdiction. In addition, if a pashall have the authority to entersuch permit.	owner to make this appli permit for work described	ication a	s his authorized application is is	d agent and I agree ssued, I certify that	to conform to the code offic	all applicable law	vs of this presentative	
SIGNATURE OF APPLICANT			ADDRES	<u> </u>	DATE	PF	HONE	
RESPONSIBLE PERSON IN CHAR	OGE OF WORK TITLE						HONE	

General Building Permit Application

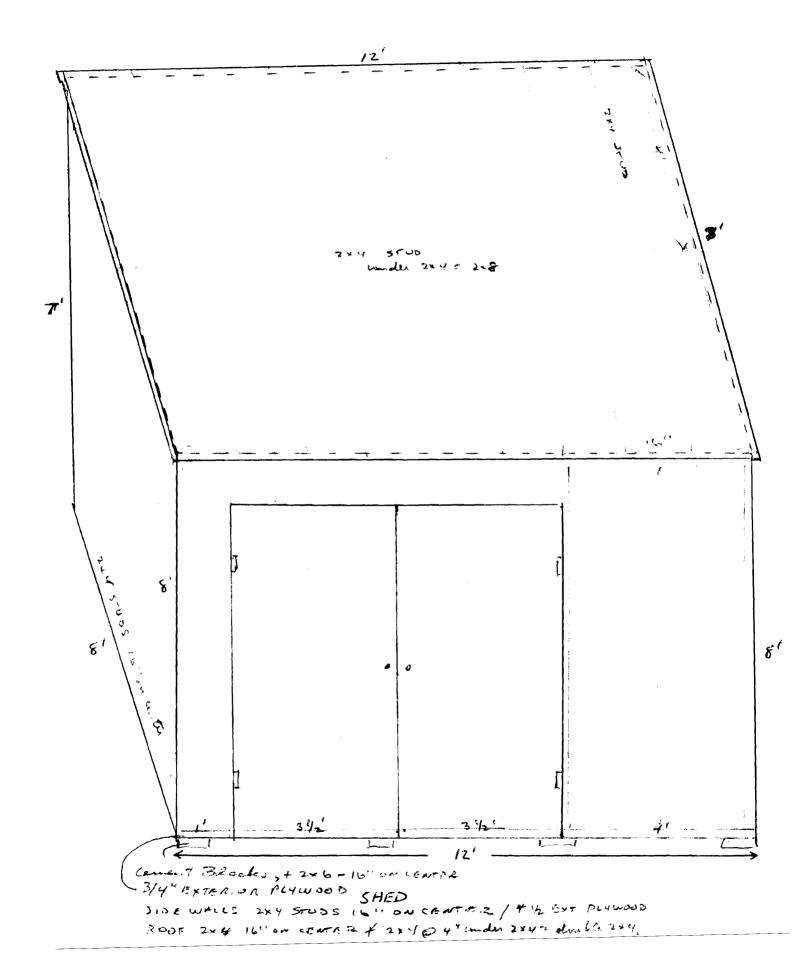
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 2 C	-(HESTER ST., PORTLAWD, P e/Area Square Footage of Lot	MAINE	
Total Square Footage of Proposed Structure			
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Bu	yer* Telephone:	
Chart# Block# Lot#		_ =	
V31 C 18	Name HELEN DALLAS ANDRE.		
431	Address 2 CHESTER S-	207-772-6188	
	City, State & Zip PORTLAND, ME, 041	02	
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of Work: \$/OOO	
	Name		
	Address	C of O Fee: \$	
	City, State & Zip	Total Fee: \$30	
Current legal use (i.e. single family)			
If vacant, what was the previous use?	1		
Is property part of a subdivision?	If yes, please name		
Project description:	If yes, please name		
, <u>-</u>			
Charles Com			
Contractor's name: GURDON AND A	RENS		
City, State & Zip POLAND, MAINTE			
Who should we contact when the permit is	_		
Mailing address: PO Box 178 W. F.			
Walling address. VEN SORT / F 1017 (•		
		1 1	
Please submit all of the information	on outlined on the applicable Chec the automatic denial of your permi		

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.

Signature:	Fordon (andrews	Date:	11/7/07	_	
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40' 8' 12' 98.34

2. Silvear
Solver

PLOT PLAN 431-C-17

Chester SF?