	y of Portland, Ma		0				rmit No: 10-0772	Issue Date		433 D0	09001	
	Congress Street, 04	+101 Tel: (.	•	, Fax: ((207) 874-871						09001	
Location of Construction: Owner Name: DORSON E				EDEDICK D ID		Owner Address: 22 VAILL ST				Phone:		
			DOBSON FREDERICK P JR Contractor Name:			Contractor Address:			Phone			
Dusmess Pame;			property owner			Contractor Address.			lione			
1 1			Phone:				Permit Type:				Zone:	
	•					Alte	erations - Dw	ellings				
Past	Use:		Proposed Use:		1	_	it Fee:	Cost of Wor	k:	CEO District:	1	
_				Home - replace /		\$40.00 \$1,085.00						
211	.gre r uniin rronne		repair front stairs		repries ,	FIDE DEDT.		_		PECTION:		
							L	Approved	Use Gr	oup:	Type:	
								Denied				
Prop	osed Project Description	1										
rep	lace / repair front stai	rs				Signature: Signa			Signatu	ature:		
						PEDESTRIAN ACTIVITIES DISTRICT			RICT (F	(P.A.D.)		
					Action: Approved		ved App	Approved w/Conditions Denied				
						Signature:				Date:		
Permit Taken By: Date Applied For:			oplied For:			Zoning Approval			<u> </u>			
ldobson 06/30/2010			0/2010			Zomig Approva			•1			
1.	This permit applicat	ion does not	preclude the	Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation		
1.	This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Shoreland		☐ Variance			Not in District or Landmark			
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			Does Not Require Review			
3.	•			Flood Zone			Conditional Use		Requires Review			
				Subdivision Site Plan			☐ Interpretation ☐ Approved		Approved			
										☐ Approved w/Conditions ☐ Denied		
				Maj [Minor MM		Denied					
				Date:			Date: D		Date:			
that this repr	reby certify that I am I have been authorize jurisdiction. In addit resentative shall have e(s) applicable to such	ed by the own ion, if a pern the authority	ner to make this nit for work desc	amed pr applica cribed in	tion as his auth the applicatio	the pro orized n is iss	agent and I a sued, I certify	agree to con that the co	form to de offici	all applicable ial's authorized	laws of	
CIC	NATURE OF APPLICAN				ABBBE	C		D 1 mm	1	DITO	NIE .	
SIG	NATURE OF APPLICAN	1			ADDRES	3		DATE	•	PHO	NE	

Location of Construction:	Owner Name:		Owner Address:	F	Phone:	
22 VAILL ST	DOBSON FREDERICI	DOBSON FREDERICK P JR				
Business Name:	Contractor Name:		Contractor Address:	F	Phone	
	property owner					
Lessee/Buyer's Name	Phone:		Permit Type:	_		Zone:
			Alterations - Dwellings	S		
Dept: Zoning	Status: Approved with Conditions	Reviewe	r· Ann Machado	Approval Date	e• 07/0	01/2010
Dept. Zoming	Status. Tippio tea with Conditions	i ic vie ve	i. I iiii i iaciiado	Approval Dan	. 077	71/2010

Note: Ok to Issue:

- 1) This permit is being issued with the condition that the front steps are being rebuilt within the existing footprint.
- 2) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that

07/08/2010 **Dept:** Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** Ok to Issue: Note:

1) 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.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE