

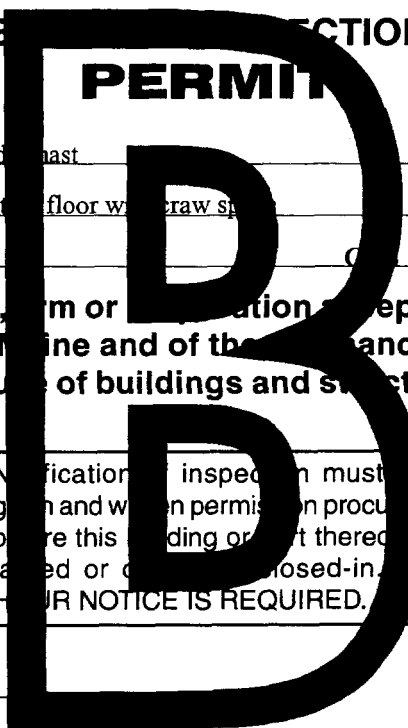
DISPLAY THIS CARD ON PRINCIPAL FRONTAGE PERMIT ISSUED
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
JUN 27 2005
Permit Number: 050838
CITY OF PORTLAND

This is to certify that Helper Anna H & /Will Vand ast
has permission to Change addition from a slab to floor w/ craw sp
AT 20 Bismark St 433 E006001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 altered or closed-in. FOUR 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 _____
Department Name

Jamie Bouk 6/27/05
Director - Building & Inspection Services

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 ISSUED

Permit No: 05-0838	Issue Date: JUN 27 2005	CB#: 433 E006001
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Location of Construction: 20 Bismark St	Owner Name: Helper Anna H &	Owner Address: 20 Bismark St	Phone: (207) 874-3251
Business Name:	Contractor Name: Will Vandermast	Contractor Address: 87 Hadlock Road West Falmouth	City of Portland
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Single Family	Zone: R-5

Past Use: Single Family	Proposed Use: Single Family w/amendment to permit # 05-0523 to change from a slab to a floor w/crawl space	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 4
Proposed Project Description: Change addition from a slab to a floor with crawl space		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB JRC-2003 Signature: JMB 6/27/05	
		PEDESTRIAN ACTIVITIES DISTRICT (P. .D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: imb	Date Applied For: 0612712005	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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"/> Date: JMB 6/27/05	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 Date: _____	Historic Preservation <input checked="" 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: JMB
	Panel 8 zone X OK Some conditions as 05-0523		

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: 05-0838	Date Applied For: 0612712005	CBL: 433 E006001
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Location of Construction: 20 Bismark St	Owner Name: Helper Anna H &	Owner Address: 20 Bismark St	Phone: () 251-3251
Business Name:	Contractor Name: Will Vandermast	Contractor Address: 87 Hadlock Road West Falmouth	Phone (207) 318-0521
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Single Family	

	Proposed Project Description: Change addition from a slab to a floor with craw space
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Dept: Zoning**Status:** Approved**Reviewer:** Jeanine Bourke**Approval Date:** 0612712005**Note:****Ok to Issue:**

- 1) Same conditions as the previously approved permit

Dept: Building**Status:** Approved**Reviewer:** Jeanine Bourke**Approval Date:** 0612712005**Note:****Ok to Issue:**

- 1) Same conditions as the previously approved permit.

All Purpose 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.

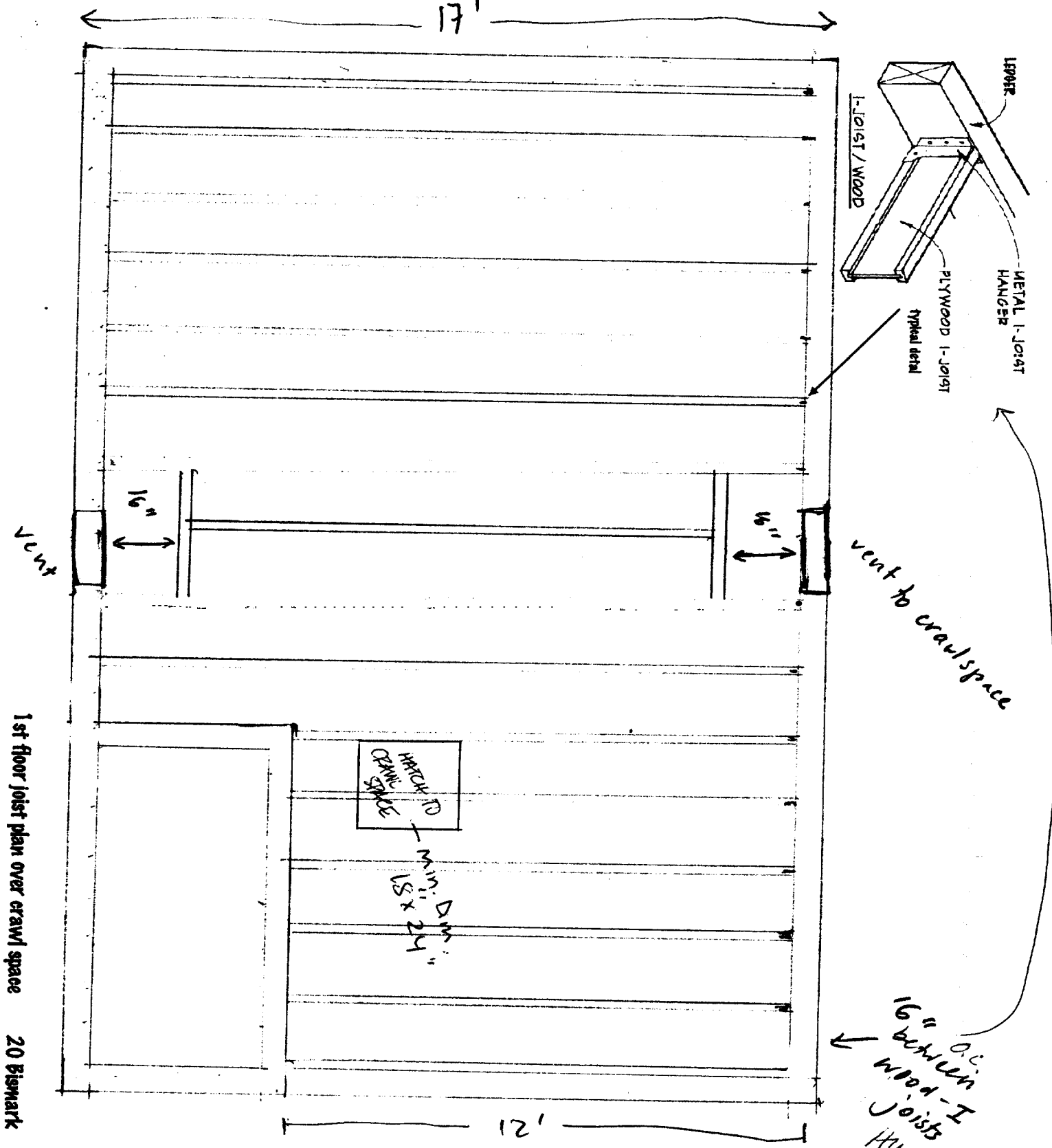
Location/Address of Construction: <u>20 BISMARCK</u>		
Total Square Footage of Proposed Structure <u>816</u>	Square Footage of Lot <u>6000</u>	
Tax Assessor's Chart, Block & lot Chart# <u>433</u> Block# <u>E</u> Lot# <u>6</u>	Owner: <u>ANNA HEPLER + JON CALAME</u>	Telephone: (207) <u>251-3251</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	cost Of Work: \$ <u>Ø</u> Fee: \$ <u>30.00</u>
Current use: <u>RESIDENTIAL</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>SF Home</u>		
Project description: <u>Amend Permit # 05-0523 to Change from slab to crawl space</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: _____		
Mailing address:		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE:		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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: <u>[Signature]</u>	Date: <u>6/27/05</u>
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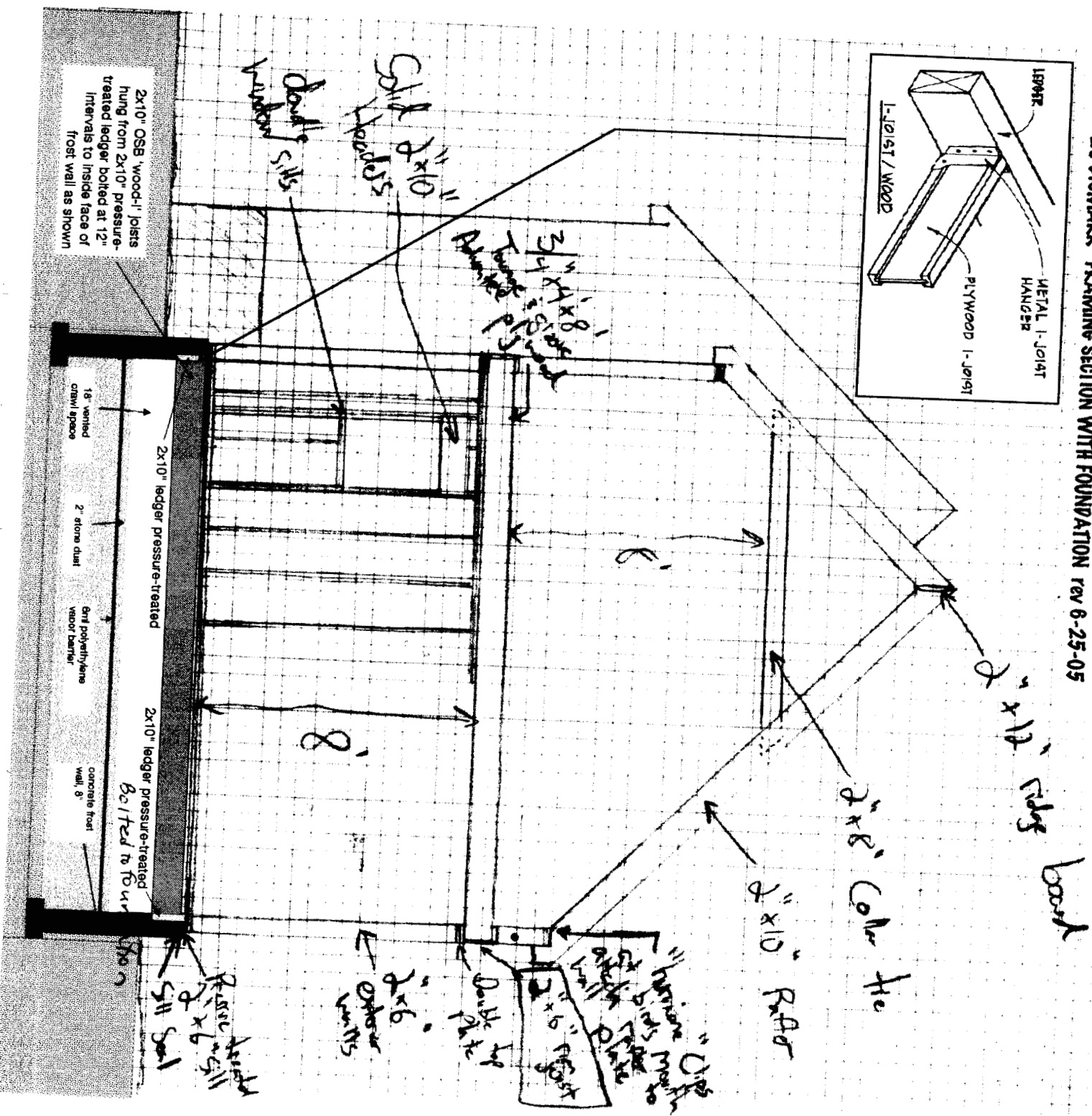
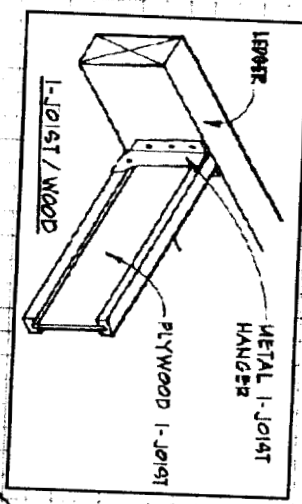
This is **NOT** a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall



1st floor joist plan over crawl space 20 Bismark

PENDING
 1st FLOOR
 JOIST PLAN
 SUBMITTED
 FOR PERMIT
 AMENDMENT

20 BISMARCK FRAMING SECTION WITH FOUNDATION rev 6-25-05



PAUSED
FRAMING
SECTION
SUBMITTED
FOR PERMIT
AMENDMENT