

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION PERMIT

Permit Number: 040093

This is to certify that Mks Development Inc /Chris Ballard

has permission to 24' x 36' foundation w/ 22' x frost w

AT 64 Yale St (Lot #7) 438 A006001

provided that the person or persons who perform or supervise the work in 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 procedure before this building or part thereof is started or otherwise closed-in. 4 HOUR NOTICE 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

James Bowke 2/3/04
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 No: 04-0093	Issue Date: FEB 04 2004	CBE: 418 A006001
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PERMIT ISSUED

CITY OF PORTLAND

Location of Construction: 64 Yale St (Lot #7)	Owner Name: Mks Development Inc	Owner Address: 7 Terra Way	Phone: 858 3800
Business Name:	Contractor Name: Chris Ballard	Contractor Address: 7 Terra Way Falmouth	Phone: 2078383800
Lessee/Buyer's Name	Phone:	Permit Type: Foundation Only/Residential	Zone: R3

Past Use: Vacant Land	Proposed Use: Foundation Only	Permit Fee:	Cost of Work: \$0.00	CEO District: 4
Proposed Project Description: 24' x 36' foundation w/ 22' x 24' frost wall		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: Foundation only	
		Signature:	Signature: <i>JMB 2/3/04</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: jmb	Date Applied For: 02/03/2004	Zoning Approval
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 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 checked="" type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>JMB 2/3/04</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input checked="" 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: _____
	<i>Panel 7 zone approved per margin on permit #04-0050 all conditions apply 2004-0008</i>		

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: 04-0093	Date Applied For: 02/03/2004	CBL: 438 A006001
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Location of Construction: 64 Yale St (Lot #7)	Owner Name: Mks Development Inc	Owner Address: 7 Terra Way	Phone: () 838-3800
Business Name:	Contractor Name: Chris Ballard	Contractor Address: 7 Terra Way Falmouth	Phone: (207) 838-3800
Lessee/Buyer's Name	Phone:	Permit Type: Foundation Only/Residential	

Proposed Use: Foundation Only	Proposed Project Description: 24' x 36' foundation w/ 22' x 24' frost wall
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Dept: Zoning	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 02/03/2004
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Approval per Marge for permit # 04-0050, all conditions apply			
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 02/03/2004
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Foundation only per DRC site plan approval issues			

**CITY OF PORTLAND, MAINE
DEVELOPMENT REVIEW APPLICATION
PLANNING DEPARTMENT PROCESSING FORM
Insp Copy**

2004-0008
Application I. D. Number
1/16/2004
Application Date
Yale St. Lot #7
Project Name/Description

Mks Development Inc
Applicant
7 Terra Way , Falmouth , ME 04105
Applicant's Mailing Address

Consultant/Agent
Agent Ph: _____ **Agent Fax:** _____
Applicant or Agent Daytime Telephone, Fax

64 - 64 Yale St , Portland, Maine
Address of Proposed Site
438 A006001
Assessor's Reference: Chart-Block-Lot

Proposed Development (check all that apply): New Building Building Addition Change Of Use Residential Office Retail
 Manufacturing Warehouse/Distribution Parking Lot Other (specify) _____

1715 sq. Ft. **7500 sq. Ft.**
Proposed Building square Feet or # of Units Acreage of Site Zoning

Check Review Required:

- Site Plan (major/minor) Subdivision # of lots _____ PAD Review 14-403 Streets Review
 Flood Hazard Shoreland Historic Preservation DEP Local Certification
 Zoning Conditional Use (ZBA/PB) Zoning Variance Other _____

Fees Paid: Site Pla _____ Subdivision _____ Engineer Review _____ Date _____

Insp Approval Status:

Reviewer _____

- Approved Approved w/Conditions See Attached Denied

Approval Date _____ Approval Expiration _____ Extension to _____ Additional Sheets Attached

Condition Compliance _____ signature _____ date _____

Performance Guarantee Required* Not Required

* No building permit may be issued until a performance guarantee has been submitted as indicated below

- | | | | |
|---|----------------|--|-----------------|
| <input type="checkbox"/> Performance Guarantee Accepted | _____ | _____ | _____ |
| | date | amount | expiration date |
| <input type="checkbox"/> Inspection Fee Paid | _____ | _____ | |
| | date | amount | |
| <input type="checkbox"/> Building Permit Issue | _____ | | |
| | date | | |
| <input type="checkbox"/> Performance Guarantee Reduced | _____ | _____ | _____ |
| | date | remaining balance | signature |
| <input type="checkbox"/> Temporary Certificate of Occupancy | _____ | <input type="checkbox"/> Conditions (See Attached) | _____ |
| | date | | expiration date |
| <input type="checkbox"/> Final Inspection | _____ | _____ | |
| | date | signature | |
| <input type="checkbox"/> Certificate Of Occupancy | _____ | | |
| | date | | |
| <input type="checkbox"/> Performance Guarantee Released | _____ | _____ | |
| | date | signature | |
| <input type="checkbox"/> Defect Guarantee Submitted | _____ | _____ | _____ |
| | submitted date | amount | expiration date |
| <input type="checkbox"/> Defect Guarantee Released | _____ | _____ | |
| | date | signature | |