

**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0388 Issue Date: CBL: 423 A005004

Location of Construction: 3 WELLSTONE Unit 4	Owner Name: WALSH STEPHANIE L & JUSTIN	Owner Address: 4 WELLSTONE DR	Phone: 
Business Name: 	Contractor Name: Maine Properties, Inc.	Contractor Address: PO Box 368 Scarborough	Phone 2078833753
Lessee/Buyer's Name	Phone: 	Permit Type: Alterations - Multi Family	Zone: 

Past Use: Multi Condo Unit 4	Proposed Use: Multi Condo Unit 4- Remove existing deck & replace w/new PT deck same foot print	Permit Fee: \$40.00	Cost of Work: \$1,500.00	CEO District: 4
Proposed Project Description: Remove existing deck & replace w/new PT deck same foot print		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	

Permit Taken By: Idobson	Date Applied For: 04/22/2008	Signature: 	Signature: 
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: Date:	

<b>Zoning Approval</b>		
2. Building permits do not include plumbing, septic or electrical work.  <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:	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 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:
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..		

**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 \_\_\_\_\_

Location of Construction: 3 WELLSTONE Unit 4		Owner Name: WALSH STEPHANIE L & JUSTIN	Owner Address: 4 WELLSTONE DR	Phone:
Business Name:	Contractor Name: Maine Properties, Inc.	Contractor Address: PO Box 368 Scarborough	Phone 2078833753	
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Multi Family	Zone:	

Dept: Zoning      Status: Approved with Conditions      Reviewer: Marge Schmuckal      Approval Date: 04/25/2008

Note: developed under the 1984 PRUD rules - Legal Use for the project is 72 residential condos      Ok to Issue:

1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. It is understood that the original footprint will not be enlarged during replacement.

Dept: Building      Status: Approved      Reviewer: Tammy Munson      Approval Date: 05/07/2008

Note:      Ok to Issue:

### 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