City of Portland, Maine	- Building or Use	Permit Applicat	tion Pe	ermit No:	Issue Date:	CBL:
389 Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-8	3716 2	2014-00186		003 F008001
Location of Construction:	Owner Name:	Owner Name:		Owner Address:		Phone:
24 MORNING ST (1st floor)	BEDARD CO	BEDARD COLLEEN C		PO BOX 4566 PORTLAND, ME 04112		
Business Name: Contractor Nam		e: Contra		tor Address:		Phone
	Lisa Vaccaro	Lisa Vaccaro		46 Everett Street South Portland ME		(207) 650-9526
	lvaccaro@mai	lvaccaro@maine.rr.com				
Lessee/Buyer's Name Phone:		Permit		Гуре:		Zone:
				tions - Comm	R6	
Past Use:	Proposed Use:	Proposed Use:		Fee:	Cost of Work:	CEO District:
3 unit	3 unit		INSPEC	\$80.00	\$6,000	.00 1
Proposed Project Description: remove closet wall and expan- into 2nd bathroom. 1st floor	urn current closet					
into 2nd bathroom. 1st floor t	PEDEST		ESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: Approved Approved w/Conditions Denied				
			Signature:		Date:	
Permit Taken By: Date Applied For:		Zoning Approval				
bjs	01/29/2014					
1. This permit application d	bes not preclude the	Special Zone or R	eviews	Zoni	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Uariance		Not in District or Landmark
2. Building permits do not in septic or electrical work.			Wetland		aneous	Does Not Require Review
3. Building permits are void within six (6) months of t	Flood Zone		Conditional Use		Requires Review	
False information may in permit and stop all work.	Subdivision		Interpre	tation	Approved	
		Site Plan		Approved		Approved w/Conditions
		Maj 🗌 Minor 🗌 MM 🗌		Denied		Denied
		Date:		Date:		Date:

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
		DATE	DUONE