City of Portland, Maine - 3389 Congress Street, 04101	U		UII	ermit No: 09-0694	Issue Date	2:	CBL: 003 K00	3001
Location of Construction:	Owner Name:	Owner Name:		Owner Address:			Phone:	
22 Vesper St	Vespa Llc	Vespa Llc		20 Coveside Rd			207-317-0408	
Business Name:	Contractor Nan			Contractor Address:			Phone	
	Rob Krouskup		8 Clover Leaf Lane Scarborou		gh	2072403668		
Lessee/Buyer's Name	Phone:			Permit Type: Amendment to Multifamily			Zone:	
Past Use: Proposed Use:					Cost of Wo	rk: Cl	EO District:]
Multi Units / 3 Units		Multi Units / Amendment to permit		\$110.00	\$9,00	00.00	1	
		ace plaster walls an ts in units 2 & 3.	nd FIRE	FIRE DEPT: Approved		INSPECT Use Grou	PECTION: e Group: Type	
Proposed Project Description: Amendment to permit # 090510	and kitchen cabine	~-8	5		Signature	6		
in units 2 & 3.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action Approved Approved w/Condition Denied				
			Sign	Signature:		D	Date:	
Permit Taken By: I gg	Date Applied For: 07/06/2009	Zoning Approval						
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoning Appeal]	Historic Preservation	
		Shoreland		Variance			Not in District or Landma	
2. Building permits do not include plumbing, septic or electrical work.		U Wetland		Miscellaneous			Does Not Require Revie	
 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 		Flood Zon		Conditional Us			Requires Review	
		Subdivision		Interpretatio			Approved	
		Site Plan		Approv	ed		Approved w/	Condition
		Maj 🗌 Mino 🗌] MM 🗌	Denied			Denied	
		Date:		Date:		Date	e:	

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 APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT	DATE	РНО	

ocation of Construction:	Owner Name:		Owner Address:		Phone:	
22 Vesper St	Vespa Llc		20 Coveside Rd		207-317-0408	
Susiness Name:	Contractor Name:		Contractor Address:		Phone	
	Rob Krouskup	skup 8 Clover Lea		Clover Leaf Lane Scarborough		
.essee/Buyer's Name	Phone:	I	Permit Type: Amendment to Multifan	nily	Zone:	
Dept: Zoning	Status: Approved with Condition	s Reviewer:	Ann Machado	Approval Date	: 07/07/2009	
Note: 1) This property shall re approval.	main a three family dwelling. Any ch	-		it application for		
Note: 1) This property shall re approval. 2) This permit is being a work.	approved on the basis of plans submi	itted. Any devia	tions shall require a sepa	it application for arate approval be	review and fore starting that	
 Note: 1) This property shall re approval. 2) This permit is being a work. Dept: Building 		itted. Any devia		it application for arate approval be Approval Date	review and fore starting that : 07/15/2009	
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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО