City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No:Q 810 761-5834 23 Cleeve St Huntley, Robert Jr. Owner Address: Lessee/Buyer's Name: Phone: BusinessName: ***** SAA 04101 Permit Issued: Contractor Name: Address: Phone: Mark Fournier/Right Angle Remodeling 856-6368 SEP - 4 1998 **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: 7,500.00 761-5834 OF PORTI INSPECTION: **FIRE DEPT.** □ Approved 1-fam Same Use Group #3 Type:503 ☐ Denied CBL: BOCA 96 Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PLAD.) Action: Approved Construct Addition (8 x 16) Approved with Conditions: ☐ Shoreland ► Denied □ Wetland ☐ Flood Zone Zacc □ Subdivision Signature: Date: ☐ Site Plan mai ☐minox☐mm ☐ Date Applied For: Permit Taken By: MG 27 August 1998 DIEMAM **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied **Historic Preservation** □ Not in District or Landmark Does Not Require Review □ Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 28 August 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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