## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 99 065 7 Location of Construction: Phone: 121 Sheridan Stret William & Mary Frank Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: 87 Douglass Street James A. Sullivan Carpentry & Renov's 879-1675 **23** 1999 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 3,400 \$ 35.00 1-Family Same CITY OF PORTLAND FIRE DEPT. □ Approved INSPECTION: Use Group: \$3 Type: 53 ☐ Denied CBL:<sub>013-K-017</sub> Zone: BOCAGE Signature: Zoning Approval: 013-K-017 Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved 10x16 P.T. Deck & 2x6 door where window is now Approved with Conditions: □ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: GD 6.6004 6-22-99 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. 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 3. □ Approved tion may invalidate a building permit and stop all work.. ☐ Denied \*\*\*\*\*Call for Pick-Up 879-1675 James Historic Preservation Not in District or Landmark □ Does Not Require Review ☐ Requires Review **PERMIT ISSUED** WITH REQUIREMENTS Action: CERTIFICATION □ Appoved 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 ☐ Approved with Conditions 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, □ Denied 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 provisions of the code(s) applicable to such permit 6-22-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT** ub

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