	y of Portland, Maine	Permit No: 08-0759		Issue Date:		CBL: 382 B01	CBL: 382 B012001				
389 Congress Street, 04101 Tel: (207) 874-8703,											
	ation of Construction: CLAYTON ST	Owner Name: LOVEN PAUL				Owner Address: 47 CLAYTON ST			Phone:		
Bus	iness Name:		Contractor Name: Burrell Construction / Mark			Contractor Address: 34 Adam Roberts Drive Windham			Phone		
	(D. 1. N.										
Less	see/Buyer's Name	Phone:	Phone:			t Type: itions - Dwel	llings			Zone:	
	t Use:	Proposed Use:			Permit Fee: Cost of Wo						
Sin	gle Family Home	Single Family I	Home - remove build 16' x 16' ut new roof over eway & new addition.					0,000.00 5			
					FIRE DEPT: Approved Denied		Approved			Tr.	
							Use Group: Type		Type		
	posed Project Description:		c								
	nove existing deck, build 16 zeway & new room.	o'x 16' Addition & put ne	ew roof over garage,		Signature:			Signature:			
010	zeway achew room.				PEDESTRIAN ACTIVITIES DISTRIC						
					Action Approved Approved Signature:			orovea w	ved w/Condition Denied  Date:		
Peri	mit Taken By:	Date Applied For:			Signat		Approva	ı	Date.		
	obson	06/25/2008				Zomig	Approva	l			
1.	Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation		
			Shoreland			☐ Variance			Not in District or Landm		
2.			☐ Wetland			Miscellaneous			☐ Does Not Require Revie		
3.	•		☐ Flood Zon		Conditional Us			Requires Review			
	False information may inverse permit and stop all work		Subdivision		☐ Interpretatio			Approved			
			Site Plan			Approved			☐ Approved w/Condition		
			Maj 🔲 Mino 🔲 MM 🗀			Denied			☐ Denied		
			Date:			Date:			Date:		
I ha juri: shal	reby certify that I am the or we been authorized by the o sdiction. In addition, if a pe Il have the authority to ente uch permit.	owner to make this appli ermit for work described	med procession and the second	as his authorized application is iss	ne prop I agent sued, I	and I agree t certify that th	o conform t se code offic	o all ap cial's au	pplicable laws othorized repre	of this sentative	
SIC	GNATURE OF APPLICAN			ADDRESS	S		DATE		P	НО	

Location of Construction:	Owner Name:		Owner Address:	Phone:		
47 CLAYTON ST	LOVEN PAUL		47 CLAYTON ST			
Business Name:	Contractor Name:	3.6.1	Contractor Address:	Phone	40	
Y (7)	Burrell Construction /	Mark	34 Adam Roberts Drive V	windnam	207650254	T
Lessee/Buyer's Name	Phone:		Permit Type: Additions - Dwellings			Zone:
		<u></u>	riddicions Dweinings			
Dept: Zoning Status:	Approved with Condition	ns <b>Reviewer</b>	: Ann Machado	Approval Da	<b>te:</b> 07/	/07/2008
Note:					Ok to Issu	e: 🗸
This permit is being approved or work.	n the basis of plans subm	nitted. Any devi	ations shall require a sepa	rate approval t	pefore starti	ng that
Dept: Building Status:	Pending	Reviewer	: Residential Plan Revie	Approval Da	te:	
Note:	Ü				Ok to Issu	e: 🗆
		CERTIFICATIO	)N			
I hereby certify that I am the owner o I have been authorized by the owner t jurisdiction. In addition, if a permit for shall have the authority to enter all ar to such permit.	of record of the named proto make this application or work described in the	operty, or that the as his authorized application is iss	ne proposed work is author d agent and I agree to confo sued, I certify that the code	orm to all appli official's autho	icable laws orized repres	of this sentative
SIGNATURE OF APPLICAN		ADDRES:	S E	DATE	P	НО