

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 38 Munjoy ST. 04101		Owner: Kathy McInerney		Phone: 774-4755		Permit No: 000182	
Owner Address: Same		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: **Sewall Associates		Address: ** P.O. Box 6610 04104		Phone: 774-4755		Permit Issued: PERMIT ISSUED MAR 15 CITY OF PORTLAND Zone: CBL 016-C-005	
Past Use: Single Family		Proposed Use: Same		COST OF WORK: \$ 4,750.00		PERMIT FEE: \$ 54.00	
Proposed Project Description: Convert Existing Room Into Bathroom With 2 Sky-Lights				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: A-3 Type: 5B BOCA 99	
				Signature:		Signature: <i>Haffer</i>	
Permit Taken By: KA				Date Applied For: GD March 14, 2000			
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action:	

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: **March 14, 2000** PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

PERMIT ISSUED WITH REQUIREMENTS