City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No:	Issue Date:	CBL:
2014-01759		016 H003001

Location of Construction:	Owner Name:	Owner Address:	Phone:
52 MONUMENT ST	BALZANO-LARUSSO JOANNE & DIANNE CAVANAUGH	1202 S MONROE ST ARLINGTON, VA 22204	(202) 234-0973

Business Name:			

Lessee/Buyer's Name	Phone:	Permit Type:	Zone:
		Alterations - Multi Family	R6

Past Use:	Proposed Use:	Permit Fee:	Cost of Work:	CEO District:
Three (3-) Family (Change of Use Under Construction) - 2013-02504	Same: Three (3-) Family	$432.00	$38,000.00	1

INSPECTION:

Proposed Project Description:

Alterations - the construction of a roof deck with access "dog house"

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: ☐ Approved ☐ Approved w/Conditions ☐ Denied

Signature: Date:

Permit Taken By:	Date Applied For:
dmc	08/06/2014

Zoning Approval

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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
☐ Shoreland	☐ Variance	☐ Not in District or Landmark
☐ Wetland	☐ Miscellaneous	☐ Does Not Require Review
☐ Flood Zone	☐ Conditional Use	☐ Requires Review
☐ Subdivision	☐ Interpretation	☐ Approved
☐ Site Plan	☐ Approved	☐ Approved w/Conditions
Maj ☐ Minor ☐ MM ☐	☐ Denied	☐ Denied
Date:	Date:	Date:

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 APPLICANT   ADDRESS   DATE   PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE   DATE   PHONE