Form # P 04

Please Read

Application And Notes, If Any,

Attached

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

PERMIT



Permit Number: 030456

This is to certify that <u>Sheehan M Elizabeth/Harper</u>	evelopn				ONLY OF PORTLAIME
has permission toRebuild Existing Back Porch	l Renov	ns to 3	Floor	iving Space —	
AT 16 St Lawrence St				. 016 J008001	

provided that the person or persons, arm or persons that the permit shall comply with all of the provisions of the Statutes of Italian and of the provisions of the Statutes of Italian and of the provision, maintenance and up of buildings and statutes, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

fication inspect in must go and with a permit in procure to the retail of the retail o

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

PENALTY FOR REMOVING THIS CARD



City of Portland, N	Maine - Building or Use	Permit Application	Permit No:	Issue Date:	CBL:		
•	04101 Tel: (207) 874-8703		02.0456	UN OF T	016 J008	8001	
Location of Construction: Owner Name:			Owner Address:	Phone:			
16 St Lawrence St	Sheehan M El	lizabeth	14 St Lawrence (1772-5356) 772-5356				
Business Name: Contractor Nam		e:	Contractor Address	Phone			
	Harpers Deve	lopment	Winthrop	20737789	2073778977		
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:	
			Alterations - Mu	ılti Family	Ro		
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:		
Multi Family- 3 Unit Multi Family-		3 Unit	\$583.00 \$80,000.0				
With Family 5 Ont	Widiti I aimiy-	3 Omt			SPECTION:		
				_ Approved Use	se Group: 2) Type:		
		1		_ Denied		-7r-5 x	
1000 · 2 (00	rdy Dwellmyur	it					
Proposed Project Description	NACT DA POCAL Jac.		-				
	Porch and Renovations to 3rd	Floor Amed I iving	Signature:	A JULIAN Sign	ature:	/) 	
Space Space	1 of the and Renovations to 510	1 Tool Living					
Space	Tue 15 Cuar	· 5 1 - C 4	I EDESTRIAN ACT	PEDESTRIAN ACTIVITIES DISTRICT (
	1 A CO	No	Action: Appro	ved Approved	w/Conditions	Denied	
	THIS IS CURA BEDROOMS (CO	(M)	Signature:		Date:		
Permit Taken By:	Date Applied For:						
gad	05/02/2003		Zoning	g Approval	/		
		Special Zone or Rev	iews Zoni	ng Appeal	Historic Prese	rvation	
	ation does not preclude the				1 _/		
Applicant(s) from Federal Rules.	meeting applicable State and	Shoreland	☐ Variance		Not in District or Landma		
2. Building permits do not include plumbing,		Wetland	Miscellaneous		Does Not Require Review		
septic or electrical work.		<u> </u>			_		
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		Flood Zone	Conditi	Conditional Use		Requires Review	
			☐ Interpretation		Approved		
		Subdivision					
		Site Plan	☐ Approv	☐ Approved		Approved w/Conditions	
		Maj Minor MN	Denied		Denied		
		o Lw xhan	Y				
		Date: - 5/1	9 05 Date:		Date:		
		- '					
		CERTIFICAT	ION				
	the owner of record of the na						
	y the owner to make this appli						
	, if a permit for work described to enter all areas covered by su						
such permit.	to effect all areas covered by st	ich permit at any reaso	mable nour to emore	te the provision (of the code(s) appi	ilcable to	
F							
SIGNATURE OF APPLICAN	NT	ADDRES	SS	DATE	PHON	Е	
RESPONSIBLE DEDOOM IN	CHARGE OF WORK, TITLE			D. AMP			
WEST CLISTOFF LEVOON IN	CHARGE OF WORK, HILE			DATE	PHON	r.	