City of Portland, M		O			Permit No:	Issue Date:	CBL:
389 Congress Street, 0	4101 Tel: (2		, Fax: (207) 874-8		2014-02147		017 A005001
65 MONUMENT ST		Owner Name: GOODENBERGER MARTIN R & JILL A GOLIKE JTS		65 N	Owner Address: 65 MONUMENT ST PORTLAND, ME 04101		Phone: (207) 999-9095
Business Name:				ı			
Lessee/Buyer's Name		Phone:		Permit Type:			Zone:
Past Use:		Proposed Use:		Alterations - Multi Family  Permit Fee: Cost of Work:			R6 CEO District:
Three (3) Family		Same: Three (3) Family		1011	\$80.00		58.67 1
				INSP:	ECTION:		,
<b>Proposed Project Description</b> Alterations that consist		ne rotted second	floor deck and				
	e and expand to a smaller third		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
floor deck.				Action: Approved Approved w/Conditions			
				Signature:			Date:
dmc Date Applied For: 09/16/2014				Zoning Approval			
1. This permit applica	preclude the	Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation	
Applicant(s) from r Federal Rules.			Shoreland		☐ Varianc	ce	Not in District or Landman
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>			Wetland		Miscell	aneous	Does Not Require Review
			Flood Zone		Condition	onal Use	Requires Review
			Subdivision		Interpre	etation	Approved
	Site Plan		Approv	red	Approved w/Conditions		
	Maj Minor MM		Denied		Denied		
	Date:		Date:		Date:		
I have been authorized b jurisdiction. In addition,	y the owner to if a permit fo	make this appl r work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify that	e to conform to t the code offici	y the owner of record and tha all applicable laws of this ial's authorized representative on of the code(s) applicable to
SIGNATURE OF APPLICANT			ADDRESS			DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						DATE	PHONE