City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: ** 28 Waterville St Johanna Pulkkinen 773-2641 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Ptld 04101 Address: Contractor Name: Phone: Jos. Daniels, 18 Paige Dr Gorham ME 04038 **reb** 1×0 1999 **COST OF WORK:** Past Use: Proposed Use: PERMIT FEE: 1-family same 3000 35.00 **FIRE DEPT.** □ Approved INSPECTION: Use Group: 4-3Type:53 ☐ Denied BOC 496 CBL: 017-E-034 Signature: Signature: Proposed Project Description: Zoning Approval: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) to remain Action: Approved Special Zone or Reviews: Approved with Conditions: □Shoreland)] 9/99 Construct deck off slider Denied ☐ Wetland ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: SP January 27, 1999 Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation Not in District or Landmark □ Does Not Require Review □ Requires Review Action: CERTIFICATION ☐ Appoved 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 ☐ Approved with Conditions □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit January 27, 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

AR/DC RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector