

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

Location of Construction: <b>108 Monument Street</b>		Owner: <b>**** Karen Sudbay ***</b>		Phone: <b>**** 761-1675***</b>		<b>Permit No:</b> <b>001065</b>	
Owner Address: <b>SAA</b>		Lessee/Buyer's Name:		Phone:		<b>Permit Issued:</b>	
Contractor Name: <b>Carl Cullenberg</b>		Address: <b>28 Chenery Street Portland Maine 04103</b>		Phone:			
Past Use:  <b>multi family</b>		Proposed Use:  <b>same</b>		<b>COST OF WORK:</b> <b>\$ 15,300</b>		<b>PERMIT FEE:</b> <b>\$ 120.00</b>	
				<b>FIRE DEPT.</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied		<b>INSPECTION:</b> Use Group: <b>AB</b> Type: <b>513</b>	
Proposed Project Description:  <b>demo existing inclosed porches and rebuild per plans</b>		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>		Zone: <b>AE</b> CBL: <b>017-G-005</b>	
		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>[Signature]</i> <b>Special Zone or Reviews:</b> <input type="checkbox"/> Shoreland <i>cha SSS</i> <input type="checkbox"/> Wetland <i>9/2/00</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>maj</i> <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: <b>K</b>		Date Applied For: <b>Sept 12 2000 K</b>					

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..

call 761-1675

**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

Sept 12 2000

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

**PERMIT ISSUED WITH REQUIREMENTS**