## 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: 25 Cedar St. Rosemarie Wheeler 879-9543 **98**0423 Lessee/Buyer's Name: Phone: Owner Address: BusinessName: 211 Cumberland Avenue Permit Issued ISSUED Contractor Name: Address: Phone: self & friend Proposed Use: **COST OF WORK:** PERMIT FEE: Past Use: APR 2 9 1998 100 25.00 FIRE DEPT. □ Approved INSPECTION: Use Group A 3 Type 5/4 1-family 1-family ☐ Denied Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Approved with Conditions: Denied replace 12-ft wall ☐ Flood Zon □ Subdivision 14 2 Signature: Date: ☐ Site Plan maj ☐minor ☐m Permit Taken By: Date Applied For: Judy Laplante 4/27/98 □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation tion may invalidate a building permit and stop all work.. ☐ Approved □ Denied Historic Preservation ☑ Not in District or Landmark Does Not Require Review □ Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE:

**CEO DISTRICT** 

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE