City of Portland, Maine - Bu	O			Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel		3, Fax: (207) 874-8		2014-00449		026 H007001
Location of Construction:  50 MYRTLE ST  ESTES CU LLC		OM BUILDERS	Owner Address: 377 FORE STREET 4TH FLOOR PORTLAND, ME 04101			Phone: (207) 617-7405
Business Name:	Estes Custom	Contractor Name: Estes Custom Builders nick@estescustombuilders.com		ractor Address: Fore St, 4th FLO	Phone (207) 671-7405	
Lessee/Buyer's Name	Phone:	Phone:		it Type:  w Single Family	Zone:	
Past Use:	Proposed Use:		Permit Fee: Cost of Work:			CEO District:
Vacant lot used for parking	Single Family	Single Family Home		\$2,495.00 ECTION:	\$200,00	00.00
Proposed Project Description:			1			
Build a new single family home - 3	with a single car					
garage on the ground floor	-	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
					ed w/Conditions Denied	
		<b>.</b>	S	ignature:		Date:
	Applied For: /07/2014		Zoning Approval			
This permit application does not preclude the		Special Zone or Reviews		Zonii	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State a Federal Rules.		Shoreland		☐ Variance	e	Not in District or Landma
<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</li> </ol>		Wetland		Miscella	nneous	Does Not Require Review
		Flood Zone		Condition	onal Use	Requires Review
permit and stop all work	ate a building	Subdivision		☐ Interpretation		Approved
	Site Plan		Approve	ed	Approved w/Conditions	
	Maj Minor MM		Denied		Denied	
	Date:		Date:		Date:	
I hereby certify that I am the owner I have been authorized by the owne jurisdiction. In addition, if a permit shall have the authority to enter all a such permit.	r to make this appl for work describe	lication as his authord in the application	nat the rized a is issu	proposed work in a gree and I agree and I certify that	to conform to the code offici	all applicable laws of this ial's authorized representativ
SIGNATURE OF APPLICANT		ADD	RESS		DATE	PHONE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE