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: 04101 04101 772-4817 Earl & Letitia Hodgkins ' 32 Alder St Lessee/Buyer's Name: Owner Address: Phone: BusinessName: SAA Ptld 04101 Permit Issued: Address: Phone: Contractor Name: COST OF WORK: PERMIT FEE: Past Use: Proposed Use: N/A \$ 25.00 3-Unit FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: R- Type: Zone: CBL: BOCA96 Signature: Zoning Approvat Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (A)A.D.) Action: Approved Practical Difficulty Variance Special Zone o Approved with Conditions: ☐ Shoreland 7 Change of Use 2-unit to 3-unit Denied П ☐ Wetland ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 6-4-99 SP **Zoning Appeal** Wariance June 3, 1999 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. 2. ☐ Conditional Use 3. 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 Practical Difficulty - \$50.00 Historic Preservation **DN**ot in District or Landmark Building Permit \$25.00 □ Does Not Require Review Total paid to date \$75.00 ☐ Requires Review PERMIT ISSUED WITH REQUIREMENTS 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 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, ☐ Denied 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 6-4-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: 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