City of Portland, Maine - Building	g or Use Permit Application	389 Congress Stre	et, 04101, Tel: (207) 8	74-8703, FAX: 874-8716
Location of Construction: 9-11 Sherman Street	Owner: Mary Porkka		one: 772-4373 or 774-5358	Permit No. 9 8 1 2 6 2
Owner Address: 193 Dingley Spring Road Gorham, M	Lessee/Buyer's Name: 04038 Tammy Duffy	Phone: Bu	sinessName:	PERMIT ISSUED
Contractor Name: Self	Address: Phone:			Pernit Issued: NOV 4 1998
Past Use:	Proposed Use:	COST OF WORK: \$ 800.00	<b>PERMIT FEE:</b> \$ 25.00	OLTY OF DODTI AND
Multi-family  5-family dwelling  5 mils a	Same  4-family dwelling	FIRE DEPT. Appro		Zone: CBL: 036-E-019
Proposed Project Description:  Renovations: removing closet betwee remove kitchen plumb:  Change Use/Make Int Reno	PEDESTRIAN ACTIV Action: Appro	ITIES DISTRICT (PAD.)  ved  ved with Conditions:	Zoning Approval:  Special Zone or Reviews:  Shoreland	
Permit Taken By: usp	Date Applied For:	Signature: 0-28-98	Date:	☐ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.</li> <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 permit and stop all work</li> <li>* Call for p/U 774-5358 Mary Porkka</li> <li>* CERTIFICATION</li> <li>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</li> </ol>				☐ Approved ☐ Approved with Conditions ☐ Denied
SIGNATURE OF APPLICANT	ADDRESS:	10-29-98 DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK		PHONE:	CEO DISTRICT	
White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector				11/ / - 1