

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Address/Location of Construction: 6/ Wess Ant 57                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                   |                                                                                                     |
| Total Square Footage of Proposed Struc                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ture:                                                                                                                                             |                                                                                                     |
| Tax Assessor's Chart, Block & Lot Chart# Block# Lot#                                                                                                                                                                                                                                                                                                                                                                                                                                   | Applicant Name: Ce/IA/ Address ALTOMISIIA                                                                                                         | Telephone: 653-2185                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | City, State & Zip                                                                                                                                 | Email:                                                                                              |
| Lessee/Owner Name:<br>(if different than applicant)                                                                                                                                                                                                                                                                                                                                                                                                                                    | Contractor Name: NIKO LOSUA<br>(if different from Applicant) Address: NATION AL AIR PROPRET                                                       | Cost of Work:                                                                                       |
| Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1 Tradition                                                                                                                                       | C of O Fee: \$                                                                                      |
| City, State & Zip:                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | City. State & Zip:                                                                                                                                | Historic Rev \$                                                                                     |
| Telephone                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Telephone - 1 15 2001                                                                                                                             | Total Fees: \$                                                                                      |
| E-mail:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | E-mail: MATAIR 173 @ 6m                                                                                                                           | Act Com                                                                                             |
| Current Use (i.e. single family)                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                   |                                                                                                     |
| If vacant, what was the previous use?                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                   |                                                                                                     |
| Proposed Specific use:                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                   |                                                                                                     |
| Is property part of a subdivision? If yes, please Name                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                   |                                                                                                     |
| Project description:                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                   |                                                                                                     |
| Who should we contact when the permit is ready:                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                   |                                                                                                     |
| Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                   |                                                                                                     |
| City, State & Zip:                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                   |                                                                                                     |
| E-mail Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                   |                                                                                                     |
| Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                   |                                                                                                     |
| Please submit all of the information outlined on the applicable checklist. Failure to do so                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                   |                                                                                                     |
| causes an automatic permit denial.  In order to be sure the City fully understands the full scope of the project, the Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Department of Permitting and Inspections on-line at <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a> , or stop by the office, room 315 City Hall or call 874-8703. |                                                                                                                                                   |                                                                                                     |
| I hereby certify that I am the Owner of recorproposed work and that I have been authorized to conform to all applicable laws of this juris is issued, I certify that the Code Official's authorized this permit at any reasonable hour to enforce the                                                                                                                                                                                                                                  | by the owner to make this application as his/<br>risdiction. In addition, if a permit for work<br>norized representative shall have the authority | her authorized agent. I agree<br>c described in this application<br>y to enter all areas covered by |
| Signature: Date: 1279-16                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                   |                                                                                                     |
| This is not a permit; you may not commence ANY work until the permit is issued.                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                   |                                                                                                     |