Cit	y of Portland, Main	e - Build	ling or Use Pe	ermit A	Application	Pe	ermit No:	Issue Dat	e:	CBL:	
389	Congress Street, 0410	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		04-1192			040 B03	3001
Location of Construction: Owner Name:			(Own	Owner Address:			Phone:		
56 Pleasant St			Dumas Jennifer P &			56 Pleasant St					
			Contractor Name:			Cont	Contractor Address:			Phone	
			Owner	Owner			Please call when ready Jennifer Portlan			n 617434263	37
Lessee/Buyer's Name Phone:						Permit Type:					Zone:
						Alt	erations - Mul	ti Family			
Past Use: Proposed Use:						Permit Fee: Cost of Work:		rk:	CEO District:		
_			3 Unit Apartme	ent - replace staircase		\$39.00		\$2,0	00.00	1	
			add small one	ndd small one floor deck		FIRE DEPT:		Approved	INSPEC	SPECTION:	
								Denied	Use Gro	oup:	Type
							_				
	posed Project Description										
rep	place staircase add small	one floor	deck			<u> </u>			Signature:		
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (F	T (P.A.D.)	
						Acti	on: Appro	ved App	proved w	v/Condition	
						Sign	ature:			Date:	
Peri	mit Taken By:	Date A	pplied For:						1		
	obson		7/2004			Zoning Approval			1		
1.	This permit application	does not	preclude the	Special Zone or Rev		ews Zoning Appeal			Historic Preservation		
1.		This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules		Shoreland		☐ Varianc	☐ Variance		☐ Not in District or Landm		
2.	Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous			☐ Does Not Require Revie			
3.				☐ Flood Zon			Conditional Us			Requires Review	
				☐ Subdivision ☐ Site Plan			☐ Interpretatio			Approved	
							Approved			Approved w/Condition	
				Maj Minor MM [Denied			Denied	
				Date:			Date:		Da	Date:	
I ha juris shal	reby certify that I am the ve been authorized by th sdiction. In addition, if a Il have the authority to en uch permit.	e owner to permit fo	o make this appli r work described	med procation a	as his authorize application is is	ne pro d ager sued,	nt and I agree to I certify that the	to conform to ne code offic	to all ap	plicable laws of thorized repres	of this sentative
SIG	GNATURE OF APPLICAN				ADDRES	S		DATE	E	P	НО

Location of Construction:	Owner Name:		Owner Address: 56 Pleasant St		Phone:	
56 Pleasant St	Dumas Jennifer P &					
Business Name:	Contractor Name:		Contractor Address: Please call when ready Jennifer Portlan		Phone 6174342637	
	Owner					
Lessee/Buyer's Name	Phone:	Phone:		Permit Type:		Zone:
			Alterations - Multi Fami	ly		
						•
Dept: Zoning Statu	is: Approved with Condition	ns Reviewer	: Marge Schmuckal	Approval Dat	te: 09	/07/2004
Note:					Ok to Issu	e: 🗸
limited to items such as stov	es, microwaves, refrigerators,	, or kitchen sink	s, etc. Without special app	provals.	c ·	
limited to items such as stov 2) This property shall remain a approval.	es, microwaves, refrigerators, three (3) family dwelling. An	, or kitchen sink y change of use	ss, etc. Without special appostant shall require a separate pe	provals.		and
limited to items such as stov 2) This property shall remain a approval.	es, microwaves, refrigerators,	, or kitchen sink y change of use	as, etc. Without special appoint shall require a separate pe	provals.		and
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CERTIFICATION

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
DECDONCIDI E DEDCON IN CHARCE OF WORK TIT	DATE	DIIO	