

Location of Construction: 15 Stetson Court		Owner: Manzo, Matthew		Phone:		Permit No: 970643	
Owner Address: 15 Stetson Crt, ME		Lessee/Buyer's Name: 04101		Phone: 772-7522		BusinessName:	
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: JUN 24 1997 CITY OF PORTLAND </div>	
Past Use: 2-fam		Proposed Use: 3-fam		COST OF WORK: \$ 20,000.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>[Signature]</i>		PERMIT FEE: \$ 125.00 INSPECTION: Use Group: Type: Signature:	
Proposed Project Description: Change Use from 2 to 3-family dwelling Construct Dormer				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____			
Permit Taken By: Mary Gresik		Date Applied For: 30 may 1997					

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

Dump Permits (if necessary) to be pulled in advance via this office.

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

Matthew P. Manzo
 SIGNATURE OF APPLICANT Matthew Manzo ADDRESS: _____ DATE: 30 May 1997 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Zone: *K-3* CBL: 044-B-028
 Zoning Approval: *creator*
 No New open Exterior
Special Zone or Reviews:
 Shoreland *stairways*
 Wetland *tree escapes*
 Flood Zone
 Subdivision *6/20/97*
 Site Plan *maj* minor imm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action: *per 6/18/97 H.P. Committee approval*
 Approved
 Approved with Conditions
 Denied

Date: 6/19/97

D. Andrews

CEO DISTRICT 2
A. Rowe