## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

i.

Location of Construction: 464 Cumberland Avenue	Owner: Timothy & REbe	cca Ermlich	Phone: ****780-8146	Permit No: 990898
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
saa				
Contractor Name:	Address:	Phon	e:	Pemit Issued:
n <u>/a</u>				AUG 2 0 Mac
Past Use:	Proposed Use:	<b>COST OF WOR</b> \$ 350.00	K: <b>PERMIT FEE:</b> \$ 30.00	
Single Family	same		Denied Use Group: $A = 3Type$ : BOCA = 46	Zone- CBL: 046-A-003
Proposed Project Description:		Signature: PEDESTRIAN A	Signature: Holder	Zoning Approval:
Replace rotted porch boards &	steps	Action:	Approved Approved with Conditions: Denied Date:	Special Zone or Reviews:     Shoreland     Wetland     Flood Zone     Subdivision
Permit Taken By: Kathy	Date Applied For:	8/12/99		□ Site Plan maj □minor ◘mmn □
<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> </ol>				☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied
Please call Timothy or Rebecca when ready 780-8146 PERMIT ISSUED CERTIFICATION WITH REQUIREMENTS				Historic Preservation <ul> <li>Not in District or Landmark</li> <li>Does Not Require Review</li> <li>Requires Review</li> </ul> Action: Appoved
authorized by the owner to make this app if a permit for work described in the appli	ord of the named property, or that the proposed lication as his authorized agent and I agree to cation is issued, I certify that the code official onable hour to enforce the provisions of the c	o conform to all applicable l's authorized representation	e laws of this jurisdiction. In additioning the shall have the authority to enter	on, Denied A
		8/12/99		- Dal plan
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	ANT BILYAY
RESPONSIBLE PERSON IN CHARGE C		PHONE:		
v	Vhite-Permit Desk Green-Assessor's C	anary–D.P.W. Pink–Pu	Iblic File Ivory Card-Inspector	