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

Location of Construction: 49 Deering Street ***David H.		Phone: 775-0101		Permit No:
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	990358
**53 Deering Street 04101				TERMINISSIEU
Contractor Name:	Address:	Phone:		Fermit Issued:
Past Use:	Proposed Use:	COST OF WORK \$ 19,000	PERMIT FEE: \$ 120.00	APR 2 1 (999
Professional Office/Apts.	Same	FIRE DEPT. LA	pproved INSPECTION: Use Group MINSPER 300 A 96	zone: CBL:047-B-014
	2 Apts on 3 Thor	Signature: 44	Signature: Hell	Le Communication
Proposed Project Description:	Drofferson 1st; 2Mf	PEDESTRIAN AC	TIVITIES DISTRICT (P.A.)	D.) 2011 9 Shored 2 D. 4?
Proposed Project Description: Remove non-bearing walls, remode	el kitchen. Stanze - Basen	Action: A A D	pproved pproved with Conditions: enied	Special Zone of Reviews:
		Signature:	Date:	☐ Subdivision / T//
Permit Taken By: SP	Date Applied For:	4-14-99		☐ Site Plan maj ☐minor ☐mm ☐
				Zoning Appeal ☐ Variance
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. Building permits do not include plumbing, septic or electrical work. 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. 				☐ Miscellaneous
				☐ Conditional Use☐ Interpretation
				☐ Approved
	F		INT ISSUED TO	Denied □ Denied
			PERMIT	Historic Preservation
			WITH REQU	□ Not in District or Landmark
			4. .	Reduires Review i/
				Action: the extensor work Shall require A Sep.
				Shall require A Sep.
	CERTIFICATION			□ Appoved 12 10 10 10 10 10 10 10 10 10 10 10 10 10
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				
areas covered by such permit at any reasonable				Date: 12010
	100000	DATE	DUONE	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
			PHONE	
RESPONSIBLE PERSON IN CHARGE OF W	ORK, TITLE		PHONE:	CEO DISTRICT 2
White	⊢Permit Desk Green-Assessor's C	anary-D.P.W. Pink-Pub	lic File Ivory Card-Inspect	or