Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application	Pe	ermit No:	Issue Dat	e:	CBL:	
389	Congress Street, 04101	Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		07-1018			048 E00	6001
Location of Construction: Owner Name:			-		Owne	Owner Address:			Phone:		
			MCGARVEY I	MARY 1	F	124	SHERMAN S'	Τ			
Business Name: Contrac			Contractor Nan	ne:		Cont	ractor Address	s <b>:</b>		Phone	
			property owne	er		Port	tland				
Lessee/Buyer's Name Phone:							it Type:				Zone:
						Alte	erations - Com	nmercial			
Past Use: Proposed Use:							Permit Fee: Cost of Work:		rk:	CEO District:	
					unit Replacing existing footprint		\$30.00		30.00	2	
							DEPT:	Approved	nproved INSPECTION:		
									Use Gro		Type
								Denied	Denied		
Proj	posed Project Description:		1			_					
Re	place existing stairs in san	ne footpri	int			Signa	iture:		Signatur	nature:	
	-	_				PEDESTRIAN ACTIVITIES DISTRIC				<u> </u>	
							_				
						Actio	оп 🔲 Аррго	ved App	proved w/Condition Denied		
				S		Signature:				Date:	
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval					
dn	nartin	08/20	)/2007			Zomig i pprovii					
1.	This permit application	does not	preclude the	Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation	
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland			☐ Variance			☐ Not in District or Landm		
2.	Building permits do not septic or electrical work.		plumbing, Wetland		etland		Miscellaneous			☐ Does Not Require Revie	
3. Building permits are void if work is not s within six (6) months of the date of issua			☐ Flood Zon			Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work					Subdivision		☐ Interpretatio			Approved	
			☐ Si	te Plan		Approv	ed		Approved w	/Condition	
				Maj Mino MM			☐ Denied			☐ Denied	
				Date:			Date:		Da	te:	
I ha juris shal	reby certify that I am the over the land the land the land the sdiction. In addition, if a pull have the authority to entuch permit.	owner to	o make this appli r work described	med proication a	as his authorized application is is	ne pro d agen sued, l	nt and I agree to I certify that the	to conform to ne code offic	to all app cial's aut	plicable laws of horized repres	of this sentative
SIG	GNATURE OF APPLICAN				ADDRES	 S		DATE		P	HO
510	INATURE OF AFFEICAN				ADDRES	3		DAII	2	1	110

Location of Construction:	Owner Name:	Owner Address:	Phone:	
124 SHERMAN ST	MCGARVEY MARY F	124 SHERMAN ST		
Business Name:	Contractor Name:	Contractor Address:	Phone	
	property owner	Portland		
Lessee/Buyer's Name	Phone:	Permit Type:	Zone	
		Alterations - Commercial		

						Alterations - Comme	erciai		
D	ept:	Zoning	Status:	Approved with Conditions	Reviewer:	Ann Machado	Approval Date:	08/24/20	07
N	ote:						Ok to	Issue: 💆	<u></u>
1) This property shall remain a two family dwelling. Any change of use shall require a separate permit application for review and approval.									
2)	This p work.		eing approved o	on the basis of plans submitted	d. Any devia	tions shall require a	separate approval before	starting tha	.t
3)	This	nermit is be	ing issued with	the condition that all the worl	k is taking nl	ce within the existin	g footprint		

Dept:	Building	<b>Status:</b>	Approved	Reviewer:	Tammy Munson	Approval Dat	te: 08/29	/2007
Note:							Ok to Issue:	<b>~</b>

## **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.

DECDONGIDI E DEDCON IN CILADOE OF WORK TIT		DATE	DITO
SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO