City of Portland, Maine	- Building or Use	Permit Applicat	tion Pe	rmit No:	Issue Date:	CBL:
389 Congress Street, 04101	0			013-02514		051 A022001
Location of Construction:	Owner Name:	Owner Name:		ddress:		Phone:
25 DEANE ST	THOMKA-GA TRUSTEE	THOMKA-GAZDIK JULIAN D TRUSTEE		ANE ST POI	(917) 816-6003	
Business Name: Contractor Name:		:	Contractor Address:		Phone	
	TBD		ME			
Lessee/Buyer's Name Phone:			Permit Type:			Zone:
			Alterations - Single Family		R5	
Past Use:	Proposed Use:	Proposed Use:		'ee:	Cost of Work:	CEO District:
Single Family	Same: Single I	Same: Single Family		\$240.00	\$22,000	.00 6
Proposed Project Description: Removal of chimney, 2 full he	ructural beam, etc.					
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved VConditions				
		Signature:			Date:	
Permit Taken By:		Zoning Approval				
bjs	11/12/2013					
1. This permit application d	oes not preclude the	Special Zone or Re	eviews	Zoni	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		Not in District or Landmark
2. Building permits do not i septic or electrical work.			Wetland		aneous	Does Not Require Review
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		Flood Zone		Condition Condition	onal Use	Requires Review
		Subdivision		Interpre	tation	Approved
		Site Plan		Approv	ed	Approved w/Conditions
		Maj 🗌 Minor 🗌 M	MM	Denied		Denied
		Date:		Date:		Date:

## 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 APPLICANT	ADDRESS	DATE	PHONE
DESDONSIDI E DEDSON IN CHADCE OF WORK TITLE		DATE	PHONE