| Cit | ty of Portland, Maine | - Building or Use | Permit Applicat | tion | Permit No: | Issue Date: | CBL: | |
|----------------------------|--|--|-----------------------|------------------------------------|---------------------------------|---------------------------|--|--|
| 389 | Congress Street, 04101 | Tel: (207) 874-8703 | Fax: (207) 874-8 | 3716 | 2014-02240 | | 051 B002001 | |
| Loca | ation of Construction: | Owner Name: | Ov | | er Address: | - | Phone: | |
| 14 EXETER ST | | AGAZARIAN | AGAZARIAN ARTHUR | | 12 EXETER ST PORTLAND, ME 04102 | | E (207) 767-4210 | |
| Busi | iness Name: | | | | | | | |
| | | | | | | | | |
| Lessee/Buyer's Name Phone: | | | Pe | | it Type: | Zone: | | |
| | | | | | erations - Two I | Family | R5 | |
| | Use: | Proposed Use: | - | | Permit Fee: Cost of Work: | | CEO District: | |
| Tw | vo- (2-) Family Home | Two- (2-) Fan | Two- (2-) Family Home | | \$80.00 | \$6,0 | 000.00 6 | |
| | | | | | INSPECTION: | | | |
| | | | | | | | | |
| | | | | | | | | |
| Prop | posed Project Description: | l . | | 1 | | | | |
| rep | pair and repoint the rear corr | ner of the existing foun | dation. | PEDESTRIAN ACTIVITIES DISTRICT | | | Γ (P.A.D.) | |
| | | | | | | TIES DISTRICT | | |
| | | | | Action: Approved Approved Approved | | oved Approv | oved w/Conditions Denied | |
| | | | | S | ignature: | | Date: | |
| Perr dn | nit Taken By: | Date Applied For: 09/25/2014 | | Zoning Approval | | | | |
| | | | Special Zone or R | eviews | Zoni | ing Appeal | Historic Preservation | |
| 1. | Applicant(s) from meeting Federal Rules. | | | | ☐ Variano | | Not in District or Landmar | |
| 2. | Building permits do not in septic or electrical work. | ☐ Wetland☐ Flood Zone☐ Subdivision | | Miscell | aneous | ☐ Does Not Require Review | | |
| 3. | Building permits are void within six (6) months of the | | | Conditi | ional Use | Requires Review | | |
| | False information may inverse permit and stop all work | | | | etation | Approved | | |
| | | | Site Plan | | Approv | ved | Approved w/Conditions | |
| | | | Maj Minor MM | | Denied | | Denied | |
| | | | Date: | | Date: | | Date: | |
| | | | | | | | | |
| | | | | | | | | |
| | | | CERTIFICA | ATIO | N | | | |
| | | | | | | | y the owner of record and tha | |
| | we been authorized by the o | | | | | | | |
| | | | | | | | cial's authorized representative on of the code(s) applicable to | |
| | h permit. | | F | ond | | Provide | and the state of t | |
| SIGNATURE OF APPLICANT | | | ADDRESS | | | DATE | PHONE | |
| | | | | | | | | |
| RES | SPONSIBLE PERSON IN CHARC | GE OF WORK, TITLE | | | | DATE | PHONE | |