City of Portland, Maine - Bui	U			2014-01004	Issue Date:	054 F049001		
389 Congress Street, 04101 Tel: (· · ·	o, Fax: (207) 874-8						
Location of Construction: 180 NEAL ST Owner Name: BRANNIGAN		N LUKE	Owner Address: 180 NEAL ST PORTLAND , ME 04102			Phone:		
Business Name:	Contractor Name: Adam Flaherty JR. attnaconstruction@yahoo.com		Contractor Address: 106 Sheridan St Portland ME 04101			Phone (207) 347-1909		
Lessee/Buyer's Name	Phone:		Permit Type: Additions - Multi Family			Zone: B2b R6		
Past Use:	Proposed Use:		Permit Fee: Cost of Work:			CEO District:		
Multi Family Multi Family		\$230.00 INSPECTION:		\$230.00 ECTION:	\$6,0	00.00 3		
Proposed Project Description:								
Replace 2nd & 3rd floor porches -san	otprint to meet stairs to 2nd floor Action							
with 3.5' x 3' landing & stairs to grade (increase in fecode) & third floor - 15' x 4' with 3.5x 3.5' landing & deck			Action: Approved Approved W/Conditions Denied Date:					
Permit Taken By: Date A	nnliad Fam	Ī	3			Date:		
	Date Applied For: 05/12/2014			Zoning Approval				
This permit application does not	preclude the	Special Zone or Re	teviews Zo		ng Appeal	Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Variance	ee	Not in District or Landmar		
 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 		☐ Wetland		Miscella	aneous	Does Not Require Review		
		Flood Zone		Condition	Conditional Use Requires Review			
		Subdivision		Interpre	etation			
	Site Plan		Approv	ed	Approved w/Conditions			
	Maj Minor MM		Denied		Denied			
		Date:		Date:		Date:		
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all around permit.	o make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify that	e to conform to t the code offici	all applicable laws of this ial's authorized representative		
SIGNATURE OF APPLICANT		ADDF	RESS		DATE	PHONE		

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE