City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 772-0452 34 West Street 04102 Stephanos Orestis Lessee/Buyer's Name: Owner Address: Phone: BusinessName: Portalnd N/A N/A N/A 95 Chadwick St. Permit Issued: Contractor Name: Address: Phone: Limington, ME 04049 637-3400 D.R. Hubbard & Sons RTE 25 COST OF WORK: Proposed Use: PERMIT FEE: <u>:</u> U Past Use: \$ 14,800 \$ 114.00 Same Multifamily **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: R-AType: 58 CBL: BOCA96 Zone: 055-A-006 Signature: A Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P/A.D.) Action: Approved Remove existing wall and replace with concrete forms & Approved with Conditions: ☐ Shoreland brick facade. Replace west foundation wall. Denied ☐ Flood Zone B ☐ Subdivision Signature: Date: ☐ Site Plan mai ☐ minor ☐ mm Date Applied For: Permit Taken By: 10-5-99 KΑ **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation tion may invalidate a building permit and stop all work... ***Call for Pick Up □ Denied Stephanos Orestis 772-0452 Historic Preservation □ Not in District or Landmark □ Does Not Require Review DLR equires Review PERMIT ISSUED WITH REQUIREMENTS Action: CERTIFICATION ☐ Approved 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 Approved with Conditions □ Denied 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 provisions of the code(s) applicable to such permit 10-5-99 ADDRESS: DATE: SIGNATURE OF APPLICANT PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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CEO DISTRICT ub