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: 13 West Street Bonnie Gallin Lessee/Buyer's Name: Phone: Owner Address: BusinessName: Phone: Contractor Name: Address: M & M Builders 16 Tenney St Yarmouth 04096 846-0774 COST OF WORK: PERMIT FEE: APR 1 5 1998 Proposed Use: Past Use: 1-fam same \$ 18,000 \$ 110.00 **FIRE DEPT.** □ Approved INSPECTION: Use Group: \$3 Type: 5 / ☐ Denied CBL: 055-B-014 BOCA46 Signature: Signature: Zóning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT To remunton Action: Approved Special Zone of Reviews Approved with Conditions: ☐ Shoreland Interior Renovations (as per plans) Denied П ☐ Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation □ Approved tion may invalidate a building permit and stop all work.. ☐ Denied **Historic Preservation** □ Not-in District or Landmark Does Not Require Review ☐ Requires Review **CERTIFICATION** Approved with Conditions 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 □ Denie 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 Date: areas covered by such permit al any reasonable hour to enforce the provisions of the code(s) applicable to such permit SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

April 6, 1998

CEO DISTRICT

Bob Marcoux