City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: Q Location of Construction: Owner: Phone: 36 Taylor St 🛂 Anne E Scanlon Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 36 Taylor St- Ptld ME 04102 Permit Issued: Contractor Name: Address: Phone: 284-6786 BRC Const Box 977 Biddeford ME 04005 MAY | 3 1997 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 3500 40 CITY OF PORT **FIRE DEPT.** □ Approved INSPECTION: 1-fam w reblt porch 1-fam w porch Use Group 3 Type 5/2 ☐ Denied Zone: CBL: BOCA96 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Special Zøne or Reviews: Approved with Conditions: rebuild porch - same footprint ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Date: Signature: ☐ Site Plan maj ☐ minor ☐ mm ☐ Date Applied For: Permit Taken By: 5/5/97 L Chase **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 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 3. □ 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 Action: CERTIFICATION ☐ Appoved 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit ADDRESS: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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

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