City of Portland, Ma	ine - Bui	lding or Use	Permit Applicat	tion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 04	Fax: (207) 874-8	3716	2013-01487			057 B008001			
Location of Construction: Owner Nam				Owner Address:				Phone:	
18 TAYLOR ST BA		BARTLETT (	BARTLETT CHRISTOPHER T		16 TAYLOR ST #1 PORTLAND 04102		, ME	ME (207) 329-4880	
Business Name:		Contractor Name:		Contractor Address:				Phone	
		Glendale Construction Corp glendalecorp@gmail.com		532 Plaines Road Hollis ME 04042			(207) 229-0190		
Lessee/Buyer's Name		Phone:		Permit Type:				Zone:	
				Alterations - Commercial				R6	
Past Use:		Proposed Use:		Perm	nit Fee:	Cost of Work: \$3,000.00		CEO District:	
six residential condos Same: six r			dential condos \$100.00   INSPECTION:		\$3,0	000.00	3		
Proposed Project Description:									
Replace existing side step									
				PEDE	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
					Action: Appro	oved Approv	ved w/Cor Da		
Permit Taken By:		Zoning Approval							
bjs	Zoming Ap			g Approvar	, p. 0 1 a.				
This permit application does not preclude the			Special Zone or Reviews		Zon	Zoning Appeal		Historic Preservation	
Applicant(s) from me Federal Rules.				☐ Variance		Not in District or Landmar			
2. Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscell Miscell	Miscellaneous		Does Not Require Review	
3. 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			Flood Zone		Condit	Conditional Use		Requires Review	
			☐ Subdivision ☐ Site Plan  Maj ☐ Minor ☐ MM ☐		Interpre	☐ Interpretation		Approved	
					Approv	Approved		Approved w/Conditions	
	Denied	Denied			Denied				
			Date:		Date:		Date:		
I hereby certify that I am to I have been authorized by jurisdiction. In addition, is shall have the authority to such permit.	the owner t f a permit f	to make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agre aed, I certify tha	e to conform to at the code office	all appleial's aut	licable laws of this horized representative	
SIGNATURE OF APPLICANT			ADDI	RESS		DATE		PHONE	