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 No961025
90 Gray St Owner Address:	Kolbert, I Leasee/Buyer's Name:	Phone:	879-7019 BusinessName:	PERMIT ISSUED
Contractor Name:	Address:	Phor	e:	Permit Issued:
Past Use:	Proposed Use:	COST OF WOR		OCT 5 1996
Last esc.	rioposed ese.	\$ 3,000.00	and the second sec	
1-fam	Same	FIRE DEPT. □ Approved INSPECTION: □ Denied Use Group 3 Type: 5 Signature: Signature:		
				Zone: CBL:
Proposed Project Description:		ACTIVITIES DISTRIC		
Change Roof Structur	Action:	Approved with Conditio	Special Zone or Reviews:	
Rebuild deck - withi		Denied	ns: \Box \Box Shoreland ~ 8 10/11/9	
		Signature:	□ Flood Zone 5 □ Subdivision	
Permit Taken By:	Date Applied For:		Date:	
Mary Gresik 07 October 1996				Zoning Appeal
1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance □ 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- tion may invalidate a building permit and stop all work 				Interpretation Approved
tion may invalidate a building permit and	stop un nork.		lo	
Coll for D/IL Lours	070 7010		MAPE	Historic Preservation
Call for P/U Laura Cianchette 879-7019				Does Not Require Review
				Requires Review
			PE	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 authorized by the owner to make this application as his outhorized accest and I access to accest and I access and I access to accest and I access and				
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 issued, I certify that the code official's authorized representative shall have the authority to enter all				ty to enter all
areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit				Date: 10/0/16
fama Higherligt	to			
SIGNATURE OF APPLICANT Laura Cia	nchette ADDRESS:	DATE:	ber 1996 PHONE:	- H. Audurs
RESPONSIBLE PERSON IN CHARGE OF WO	DRK, TITLE		PHONE:	CEO DISTRICT
White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector				nspector
				TI Mun 37