## 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: Kelly, Carol 1. 15 Briggs St 828-0810 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 20 Taylor St Contractor Name: Address: Phone: FEB | 1 1999 **COST OF WORK:** Past Use: PERMIT FEE: Proposed Use: \$ 8,000.00 60.00 INSPECTION: **FIRE DEPT.** □ Approved OF PORTLAND Use Group: 13 Type: 57 ☐ Denied 1-fam Same CBL: BOCAGE 057-J-008 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (A).A.D.) Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Denied Construct dormers, new bath on third floor □ Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 1874 bult UB 28 January 1999 **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 TUNOt in District or Landmark □ Does Not Require Review □ Requires Review Action: CERTIFICATION □ Appoved □ 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 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, □ Denied 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 28 January 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

White Permit Dock Green Assessor's Canany D.B.W. Dink Buklin Eile Livery Cont.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CEO DISTRICT

PHONE: