City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Permit No. 9 058 4 846-2672 ****58 Clark Street 04102 Steven Sola Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Phone: (207) 870-7181 Address: Contractor Name: Brian Dobson Dobrie Bldg & Remodeling Saco, ME (207) 831-1343 COST OF WORK: PERMIT FEE: Proposed Use: Past Use: \$ 25.00 \$ 500.00 2-Unit Same INSPECTION: **FIRE DEPT.** □ Approved Use Group: 8-3 Type: 513 ☐ Denied CBL: 057-J-024 DOCA 96 Signature: Zoning Approval: 🐠 Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P Action: Approved Special Zone of Reviews: Approved with Conditions: Interior Renovations. □ Shoreland Denied Remove load barring wall & replace with laminated □ Wetland ☐ Flood Zone gangbeam. Also remove back stairs. Signature: Date: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: SP 5-25-99 **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 ☐ 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 PERMIT ISSUED Action: WITH REQUIREMENTS 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CEO DISTRICT

PHONE:

