City of Portland, Maine - 1	Building or Use	Permit Applicat	tion	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101 To	el: (207) 874-8703	6, Fax: (207) 874-8	3716	2011-01226		058	3 D011001
Location of Construction:	Owne		r Address:		Phone:		
26 BRACKETT ST	26 BRACKET	TT STREET LLC	26 BRACKETT ST PO 04101		F PORTLAND,	ME (207)) 619-1962
Business Name:			1				
Lessee/Buyer's Name	Phone:	Phone: Proposed Use:		it Type:		Zone:	
Past Use:	Proposed User			galization of No nit Fee:	on-Conforming U		
1st floor two retail spaces & 2	_	1st floor two retail spaces & three dwelling units above - legalize one nonconforming dwelling unit -		nt ree.		\$0.00	3
dwelling units above	three dwelling legalize one ne			INSPECTION:			
Proposed Project Description: Legalization of 1 Nonconforming	dwelling unit (orig	inal permit in One					
Solution -2011-05-1226)	•		ESTRIAN ACTIV	TRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: Approved Approved Approved Signature:		oved Approve	roved w/Conditions Denied		
					Date:		
Permit Taken By: Da ldobson		Zoning Approval					
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zon	Zoning Appeal		c Preservation
		Shoreland		☐ Varian	☐ Variance ☐		District or Landmar
2. Building permits do not incluse septic or electrical work.	Wetland		Miscel	Miscellaneous		Iot Require Review	
3. Building permits are void if within six (6) months of the	Flood Zone		Condit	Conditional Use		es Review	
False information may invalue permit and stop all work	Subdivision		Interpr	Interpretation		ved	
	Site Plan		Appro	Approved		ved w/Conditions	
	Maj Minor MM		☐ Denied	☐ Denied ☐			
	Date:		Date:	Date: I		Date:	
		CERTIFICA	TION	N			
I hereby certify that I am the own I have been authorized by the own jurisdiction. In addition, if a pern shall have the authority to enter all such permit.	ner to make this appl nit for work describe	amed property, or the lication as his authored in the application	nat the rized a is issu	proposed work agent and I agre aed, I certify tha	ee to conform to at the code offici	all applicable al's authorize	laws of this d representative
SIGNATURE OF APPLICANT	ADDRESS			DATE		PHONE	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE					DATE		PHONE