City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: **99** 08 5 6 Location of Construction: Owner: Phone: 321 Spring Street Portland Maine 04102 Robert Savadore 772-7265 Owner Address: Phone: Lessee/Buver's Name: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: 799-8725 25 Birch Rd. So. Portland Peter Darling COST OF WORK: PERMIT FEE: Proposed Use: Past Use: **8 1 8** \$1,500 \$36.00 single family same **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: 13 Type 5 Zone: CBL: 061-C-009 BOCAGG Signature: Signature: Zoning, Approva Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved Special Zoné or Replace existing porch with minor changes Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone Date: □ Subdivision Signature: □ Site Plan maj □minor □mm □ Date Applied For: Permit Taken By: Κ. Aug. 6, 1999 K. 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 3. ☐ 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 ▶6 ☐ Approved with Coi 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 □ Denied 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 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 ADDRESS: SIGNATURE OF APPLICANT PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT