Permit Ng: 90430 Phone: 773-6389 Location of Construction: Owner: Marv A. Dyro 34 Emery Street Owner Address: Lessee/Buyer's Name: Phone: BusinessName: PERMIT ISSUED SAA Permit Issued: Address: Phone: Contractor Name: 773-6012 34 Emery Street (son) Stephen S. Dyro ▲ 1999 **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: 2,000 \$ 30.00 \$ CITY OF PORTLANI Same 1-Family FIRE DEPT. Approved **INSPECTION:** Use Group: 8 3 Type: 5 B □ Denied BOCA96 Zone: CBL: 061-H-008 Signature: Signature: 101 Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) toreu Action: Approved Special Zone or Rev 12' x 15' deck Approved with Conditions: □ Shoreland Denied □ Wetland □ Flood Zone □ Subdivision Signature: Date: Site Plan maj Dminor Dmm D Permit Taken By: Date Applied For: 4 - 15 - 99SP **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □Miscellaneous PERMIT ISSUED WITH REQUIREMENTS Building permits do not include plumbing, septic or electrical work. 2. 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 ****Call Stephen Dyro 773-6012 for pick up. Not in District or Landmark Does Not Require Review If calling April 16 at 874-8250 during work hours □ Requires Review Action: CERTIFICATION 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 DApproved with Conditions 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 Date areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 4 - 16 - 99DATE: PHONE: SIGNATURE OF APPLICANT ADDRESS: 3 **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT** White–Permit Desk Green–Assessor's Canary–D.P.W. Pink–Public File Ivory Card–Inspector

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716