## 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:	
354 Danforth Street	Karen Sanford			Permit No. 980080
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name:	Address:	Phone:		Permit Issued:
Gary Shank	15 Oak St So. Pt1d. ME $04106$ 767-2934			
Past Use:	Proposed Use:	COST OF WORK \$ PPEAL TEE	<b>PERMIT</b> FEF: <b>\$</b> 25.00	<b>FEB - 5</b> 1998
Single fam	Same w/additional unit	FIRE DEPT.		CITY OF PORTLAND
		Signature:	BOCA96 Holper	Zone: CBL: R-4 061-H-012
Proposed Project Description: PEDESTRIAN ACTIVITIES D			TIVITIES DISTRICT (P.K.D.)	Zoning Approval:
	Action: A	pproved 🗸 🖓	Special Zone or Reviews:	
Conditional Use Appeal	A	pproved with Conditions: $\Box$		
Change Use From 1 to 2 Fami	D	enied		
				$\Box$ Flood Zone $\int g_{\mu} C(\hat{q})$
		Signature:	Date:	
Permit Taken By:	Date Applied For:	48		Site Plan ma
Schmuckal/Dover 1/1/48				Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				
2. Building permits do not include plumbing, septic or electrical work.				
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				Conditional Use
tion may invalidate a building permit and stop all work				Approved 112299
				Denied
	PERMIT ISSUED WITH REQUIREMENTS		TAINED // 22/98	Historic Preservation
Mail to: Gary Shank	WITH DMIT ISCU	APPEAL SUS	STAINED / / ~ / / 0	□ Not in District or Landmark □ Does Not Require Review
Mail to: Gary Shank 15 Oak St	KEQUIPE.			Brequires Review
	4106		No Extu	n'al clamer o
50. Torciand, ME 0	4100			□ Not in District or Landmark □ Does Not Require Review ☑ Requires Review ✔ Charpen . 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				
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				, laplan
areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit				Date: 1/20/06
				/ l
Laren K Sanlow 354 Vantorth 1-7-98 774-0134				$\sim$
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	- 101-7
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<b>RESPONSIBLE PERSON IN CHARGE OF WORK</b>			PHONE:	
White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector				