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: Permit Nou Q 450 St. JOhn St. Douglas Cheverie 774-6140 Owner Address: Lessee/Buyer's Name: BusinessName: Phone: same Address: Phone: Contractor Name: owner COST OF WORK: APR 2 | 1999 Past Use: Proposed Use: PERMIT FEE: 400.00 25.00 Single Family same INSPECTION: 14/APT. **FIRE DEPT.** □ Approved ☐ Denied Use Group: 8-3 Type: 5/5 BOCA 96 Zone: CBL: 066-F-017 Signature: Signature: Proposed Project Description: Zoning Approval: PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved Special Zone or Reviews: Approved with Conditions: □ Shoreland 4/2/100 adding on to existing 10 x 12 deck Denied □Wetland ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: 4-13-99 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 3. 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 WITH REQUIREMENTS Historic Preservation Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: **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 □ 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 4-13-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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CEO DISTRICT