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

Logation of Construction:	Quimani		Dh		-
Location of Construction: Owner: 117 Massachusetts Ave, 04102 Mark McGhie			Phone: 775–5562		Permit No:
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:		000509
117 Massachusetts Ave, 04102	Lessee/Buyer s Name.	r none.	Dusiness	siname.	Getter
Contractor Name:	Address:	Phone	Phone:		Permit Issued:
N/A	rudress.	Those	•		
Past Use:	Proposed Use:	COST OF WORK	ζ:	PERMIT FEE:	
		\$ 1,300.00		\$36.00	
single Family dwelling	SAME	FIRE DEPT.  Approved		INSPECTION:	
			enied	Use Group Type: 53	
		Signature:		BOCH99 Signature: Norther	Zone CBL: M
Proposed Project Description:			CTIVITIE	S DISTRICT (P.A.D.)	Zoning Approval:
Replace existing 16 x 16 attached			0- NJ-5/17/00		
					Special Zone or Reviews:
			Approved w Denied	vith Conditions:	Shoreland min 14-422
		1	Jenneu		UWetland
		Signature:		Date:	□ Subdivision
Permit Taken By:	Date Applied For:	Signature.		Duic.	☐ Site Plan maj ⊡minor ⊡mm ⊡
KA		5/17/00			
					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.					☐ Miscellaneous □ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-					
tion may invalidate a building permit and stop all work					
					Denied
					Historic Preservation
					□ Not in District or Landmark □ Does Not Require Review
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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit					Action:
					· _ · _ ·
					□ Approved with Conditions □ Denied
					El Deffied
					Date:
areas covered by such permit at any reasonable	four to enforce the provisions of the co	ue(s) applicable to such	permit		
		5/17/00			_
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	
				2	PERMIT ISSHED
<b>RESPONSIBLE PERSON IN CHARGE OF WO</b>	PK TITI E			PHONE:	- DENTH DENUR MENTS
RESPONSIBLE PERSON IN CHARGE OF WO	NN, IIILL			THOME.	PERMIT ISSUED CHOTHISFAILT
White-H	Permit Desk Green–Assessor's Ca	nary-D.P.W. Pink-Pul	blic File I	vory Card-Inspector	