Cit	y of Portland, Main	ne - Building or Use 1	Permit Applica	tion	Permit No:	Issue Date:	CBL:
389	Congress Street, 041	01 Tel: (207) 874-8703	Fax: (207) 874-8	8716	2013-01299		122 E012001
Loca	ation of Construction:	Owner Name:	Owner A		r Address:		Phone:
342 WOODFORD ST		JMB PROPER	JMB PROPERTIES LLC		MARGINAL W RTLAND, ME 0		
Business Name:		Contractor Name	Contractor Name:		actor Address:	Phone	
		Joe Flynn			Marginal Way F	(207) 776-5226	
joe@joe			realestate.com				
Less	ee/Buyer's Name	Phone:			it Type:	Zone:	
					ange of Use - On	•	
Past Use:		Proposed Use:	_		it Fee: Cost of Work:		CEO District:
Single Family		Change of use	to 2 Family	INCD	\$105.00 ECTION:		\$0.00 7
Prop	posed Project Description:						
_	-	family as per plans. Interio	or renovations				
sho	own under separate perm	nit #2013-01235		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: Approved App		ved Approx	ved w/Conditions Denied
				S	ignature:		Date:
Permit Taken By: Date Applied For: 06/21/2013				Zoning Approval			
1.	This permit application	does not preclude the	Special Zone or Reviews Shoreland		Zoniı	ng Appeal	Historic Preservation
		ting applicable State and			☐ Variance	e	☐ Not in District or Landma
2.	Building permits do no septic or electrical wor	☐ Wetland		☐ Miscella	nneous	Does Not Require Review	
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work			☐ Flood Zone ☐ Subdivision ☐ Site Plan Maj ☐ Minor ☐ MM ☐		Condition Condition	onal Use	Requires Review
					Interpre	tation	Approved
					Approve	ed	Approved w/Conditions
					Denied		☐ Denied
			Date:		Date:		Date:
I ha juris shal such	we been authorized by the sdiction. In addition, if all have the authority to en permit.	ne owner to make this appl a permit for work describe	lication as his authord in the application uch permit at any re	hat the orized a n is issu easonal	proposed work in agree and I agree and I certify that	to conform to the code office the provisi	by the owner of record and that applicable laws of this cial's authorized representative on of the code(s) applicable to
SIG	NATURE OF APPLICANT		ADD	RESS		DATE	PHONE
RES	SPONSIBLE PERSON IN CH	ARGE OF WORK, TITLE				DATE	PHONE