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 No: 9 8 0 3 4 3	
33 Fairmont St					90034
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:		DEDMIT 10011
SAA Ptld, ME 04103		772-4756			FERMIT ISSUED 1
Contractor Name:	Address:	Phone	:		Pernit Issued:
					200 2 2 2 2 2
Past Use:	Proposed Use:	COST OF WORL		PERMIT FEE:	
		\$ 15,000.00		\$ 95.00	
	Same	FIRE DEPT. A	Approved	INSPECTION:	CITY OF PORTLAND
2-fam	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		Denied	Use Group: 73 Type: 5	100000000000000000000000000000000000000
				130CA 96_1 D1	Zone: CBL:
		Signature:		Signature: The	
Proposed Project Description:		PEDESTRIAN A	CTIVITIE	S DISTRICT (P/A/D.)	Zoning Approval: OK
		Action:	Approved		To remain 2 family Special Zone or Reviews:
	Approved with Conditions:			Shoreland Qwelling	
Int Renovations to 1st floor				□ Wetland	
					□ Flood Zone
		Signature:		Date:	□Subdivision
Permit Taken By:	Date Applied For:				☐ Site Plan maj ☐minor ☐mm ☐
Mary Gresik	0	7 April 1998			Zanina August
This populity application does not proclude the Applicant(s) from meeting applicable State and Enderel rules					Zoning Appeal □ Variance
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.					☐ Miscellaneous
2. 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
tion may invalidate a building permit and stop all work					□Approved
	•				□ Denied
	•				Historic Preservation
					☑Not in District or Landmark ☐Does Not Require Review
					☐ Requires Review
					= requires review
					Action:
CERTIFICATION					☑Appoved
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					☐ Approved with Conditions
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					□Denied
					Date: 4/8/98
areas covered by such permit at any reasonable h	our to enforce the provisions of the code	e(s) applicable to such	permit		-1/-0/1
2	•				
Samue lat		07 Apri	1 1998		1/1 11 0 5 ()
SIGNATURE OF APPLICANT Samuel Mar	tin ADDRESS:	DATE:	//	PHONE:	Joseph C
Jamael Hal					V/P
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE			PHONE:	CEÓ DISTRICT
Milita - Po	ownit Dook Groom Assessed Co-	om, DDM Dimir Del	blia Ella '	ham. Cand In	
wnite-P	ermit Desk Green–Assessor's Can	ary-D.P.VV. PINK-Pu	DIIC FIIE	vory Card-Inspector	MA. Lea-4
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