City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716						Permit No: 09-0834	Issue Dat	e:	CBL: 126 I015	001	
Location of Construction:Owner Name:44 COYLE STLANDRY THO						Owner Address: 44 COYLE ST			Phone: 207-939-0185		
Business Name: Contractor Nam			1e: Cor		ontractor Address:		Phone				
Lessee/Buyer's Name Phone:					Permit Type: Tents				Zone:		
Past Use: Proposed Use					Permit Fee: Cost of Work:		rk:	CEO District:]		
Sin	gle Family Home		Single Family Home - 3			\$90.00		\$0.00	3		
(20'x40'),(nopies (20'x20), 15'x15) 8/14-8/17 for Block)8/23/2008		Approved			SPECTION: Jse Group: Type			
Proposed Project Description: 3 Tents/Canopies (20'x20), (20'x40'),(15'x15) 8/14-8/17 = 08/23/2008				ck Party on			0	gnature:			
00/2	25/2008			PED		PEDESTRIAN ACTIVITIES DISTRICT (P.4			P.A.D.)	A.D.)	
				Action Approved App		proved w	oved w/Condition Denied				
					Signature:			Date:			
Permit Taken By:Date Applied For:Imd08/05/2009			Zoning Approval								
1. This permit application doe		bes not preclude the	Special Zone or Reviews		Zoning Appeal			Historic Preservation			
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland			Variance		Not in District or Landma			
2.	2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscell	Miscellaneous		Does Not Require Revie		
 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 Zon		Conditional Us			Requires Review			
			Subdivision		Interpr	Interpretatio		Approved			
			🗆 Si	te Plan		Approv	red		Approved w/	Condition	
			Maj [_ Mino _ MM		Denied			Denied		
			Date:			Date:		D	ate:		

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО

Location of Construction	: Owner Name:	Owner Name:		1	Phone:	
44 COYLE ST	LANDRY THOMAS J	LANDRY THOMAS J			207-939-0185	
Business Name:	Contractor Name:	Contractor Name:		I	Phone	
Lessee/Buyer's Name	Phone:		Permit Type: Tents		Zone:	
Dept: Zoning	Status: Approved	Reviewer	: Marge Schmuckal	Approval Date	e: 08/07/2009	
Note:					Ok to Issue: 🔽	
Note: Dept: Building	Status: Approved with Condition					
				Approval Date		
Dept: Building Note:		is Reviewer	: Tammy Munson	Approval Date	e: 08/11/2009	
Dept: Building Note: 1) If food is to be prepa	Status: Approved with Condition	is Reviewer	: Tammy Munson	Approval Date	e: 08/11/2009	

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