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

Location of Construction:	ion of Construction: 15 Longfellow St Alex Brown		Phone:		Permit No:	
Owner Address:	Lessee/Buyer's Name:	Phone:	Busines	ssName:	980098	
Contractor Name:	Address:	Phone:			PERMITOISSUED	
Past Use:	Proposed Use:	COST OF WOI	COST OF WORK: PERMIT FEE: \$ 25.00		PEB 1 2 1998	
duplex residential	same/home occupation	FIRE DEPT. Approved INSPECTION:		INSPECTION: Use Group R-3 Type: 5	Zono: CBL:126-B-015	
Proposed Project Description:	PEDESTRIAN ACTIVITIES DISTRICT (P. Approved			Zoning Approval: 2 m +5 0 per mic vote		
Home occupation (mar	Approved with Conditions:			Special Zone or Reviews: Shoreland Wan Conduction Wetland Flood Zone		
Permit Taken By:	Date Applied For:	Signature:		Date:	☐ Subdivision☐ Site Plan maj ☐minor ☐mm ☐	
Sherry Pinard February 2, 1998					Zoning Appeal	
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. Building permits do not include plumbing, septic or electrical work. 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 Mail to: P.O. Box 9715 -179 Portland, ME 04104					☐ Variance ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied	
Mail to: P.O. Box 9 Portland,		TO THE STATE OF TH	A REQUIRE	SUED MENTS	Historic Preservation ☐ Not in District or Landmark ☐ Boes Not Require Review ☐ Requires Review	
					Action:	
authorized by the owner to make this applif a permit for work described in the application.	CERTIFICATION ord of the named property, or that the proposed ication as his authorized agent and I agree to eation is issued, I certify that the code official nable hour to enforce the provisions of the co	conform to all applicates authorized representations.	ole laws of thative shall ha	nis jurisdiction. In addition	, Denied / /	
SZONATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	- M	
Alex Brown		24.44.24.				
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:				PHONE:	CEO DISTRICT	

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