

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

Location of Construction: ***35 Concord St.		Owner: Matilda Love		Phone: 773-5280		Permit No: <b>990662</b>	
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: John Murton, Mark Stimpson		Address:		Phone: 761-9400 x <b>180</b>		Permit Issued: <b>24 1999</b>	
Past Use:  1-Family		Proposed Use:  Same		COST OF WORK: \$ 5,000		PERMIT FEE: \$ 45.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <b>43</b> Type: <b>51</b> <b>BOC-96</b>	
Proposed Project Description:  Demolish garage to be rebuilt in future, handgrading, <del>build 16 x 25 deck.</del> <i>→ notified by Rule</i> <i>deleted from the permit by owner 4/23/99</i>				Signature:		Signature: <i>[Signature]</i>	
Permit Taken By: <b>SP</b>		Date Applied For: 6-14-99		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Zone: <b>R-5</b> CBL: <b>130-H-010</b> Zoning Approval: <i>OK with conditions</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

- 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..

**PERMIT ISSUED WITH REQUIREMENTS**

**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

6-14-99

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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

**PERMIT ISSUED**  
**24 1999**  
CITY OF PORTLAND  
Zone: **R-5** CBL: **130-H-010**  
Zoning Approval: *OK with conditions*  
Special Zone or Reviews:  
 Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm   
**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review  
Action:  
 Approved  
 Approved with Conditions  
 Denied  
Date: *[Signature]*  
**CEO DISTRICT** **3**  
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