City of Portland, Maine - Building or Use Permit Application						rmit No: 07-1001	Issue Date:		CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703,				207) 874-8716	0			213 A016001			
Location of Construction: 50 OLD MAST RD Owner Nam NGUYEN T			IUY T & DUNG TRUNG		Owner Address: 5 PARIRIE WAY			Phone:			
Bus	iness Name:		Contractor Name: property owner			Contractor Address:			Phone		
						land			Γ_		
Lessee/Buyer's Name Phone:					Permit Type: Additions - Commercial				Zone:		
	t Use:	Proposed Use:				Permit Fee: Cost of Wo					
Sin	gle Family		Single Family 11' x 15' deck on back of garage		\$40.00		\$1,3	00.00			
		of garage			FIRE DEPT: App		Approved		NSPECTION:		
						☐ Denied		Use Group: Type		Type	
	posed Project Description:										
11	x 15' deck on back of garag	ge			Signature: PEDESTRIAN ACTIVITIES DIST			Signature:			
					Action Approved Approved Approved						
			Signati						Date:		
Permit Taken By: dmartin Date Applied For: 08/15/2007			Zoning Approval								
1.	This permit application d	loes not preclude the	Special Zone or Reviews		Zoning Appeal			Historic Preservation			
1.	 This permit application does not preclu Applicant(s) from meeting applicable S Federal Rules. 		Shoreland			☐ Variance			☐ Not in District or Landm		
2.	Building permits do not include plumbing, septic or electrical work.		Wetland			Miscellaneous			☐ Does Not Require Revie		
3.	•		☐ Flood Zon		Conditional Us			Requires Review			
	False information may in permit and stop all work	9	Subdivision			☐ Interpretatio			Approved		
			Site Plan			Approved			Approved w/Condition		
			Maj [Mino MM	☐ Denied				☐ Denied		
			Date:			Date:			Date:		
I ha juri sha	ereby certify that I am the o tive been authorized by the sdiction. In addition, if a p Il have the authority to ento uch permit.	owner to make this appli ermit for work described	med procession and the second	as his authorized application is iss	ne prop d agen sued, I	t and I agree t certify that th	to conform to ne code office	to all ap cial's au	pplicable laws of the state of	of this sentative	
SIC	GNATURE OF APPLICAN			ADDRES	2		DATE	7	ת	НО	
310	INATURE OF APPLICAN			ADDRES	•		DATE	•	P	110	

T		O N		Owner Address:		lnı.	
	of Construction: MAST RD		Owner Name: NGUYEN THUY T & DUNG TRUNG			Phone:	
Business			Contractor Name: property owner		5 PARIRIE WAY Contractor Address:		
Dusiness	ivanie.				Portland		Phone
Lessee/B	uyer's Name	Phone:		Permit Type:	Zone:		
				Additions - Commercial			
	YY	X					10.4.10.00
Dept:	Historic Stat	tus: Not Applicable	Reviewer	: Scott Hanson	Approval Date: 09/04/2007		
Note:						Ok to Issu	e: ✓
Dept:	Zoning Stat	tus: Approved with Condition	ns Reviewer :	: Marge Schmuckal	Approval Dat	te: 08/	/23/2007
Note:		II				Ok to Issu	
	s is NOT an approval for	r an additional dwelling unit.	You SHALL NO	OT add any additional kitch			
		ves, microwaves, refrigerators				incruumg, c	at not
2) Sep	arate permits shall be re	equired for future decks, sheds	, pools, and/or g	garages.			
3) This	s property shall remain a	a single family dwelling. Any o	change of use sh	all require a separate perm	it application for	or review a	nd
	roval.	single running an enning runny e	mange of else sin	an require a separate perm	т арричаной т		
4) This	s permit is being approv	ved on the basis of plans subm	itted. Any devi	ations shall require a sepa	rate approval b	efore starti	ng that
		a conversation with the owner			e met. I told th	e owner tha	at he
wou	ild be required to string	his rear property line for the Co	ode Enforcemen	it Officer.			
Dept:	Building Stat	tus:	Reviewer	Residential Plan Revie	Approval Dat	te:	
Note:	J					Ok to Issu	e: 🗆
			CERTIFICATIO	ON			
I have be jurisdicti	een authorized by the over ion. In addition, if a per the authority to enter	ner of record of the named pro wner to make this application a mit for work described in the a all areas covered by such perr	as his authorized application is iss	l agent and I agree to confoued, I certify that the code	orm to all appli official's autho	cable laws orized repres	of this sentative

ADDRESS

SIGNATURE OF APPLICAN

DATE

PHO