City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Mr. and Mrs. Phone: 0000541 174 Clinton Street MAXXXXXX Anthony C. Profenno Jr. 773-1395 Lessee/Buyer's Name: BusinessName: Owner Address: Phone: 174 Clinton Street Phone: **773-7762** Permit Issued: Contractor Name: Address: 8 Nonesuch Cove Road, Scarborough Carroll Newman & Son Proposed Use: COST OF WORK: PERMIT FEE: Past Use: 1,500.00 36.00 **FIRE DEPT.** □ Approved **INSPECTION:** Use Group: R-3 Type: 5/3 ☐ Denied BOCA99 132-J-012 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Replace interior chimney w/ exterior 16 x 20 brick Approved with Conditions: □ Shoreland 30 ft tall chimney Denied П □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: 5/22/00 Kathy J. F. Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. □ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation Not in District or Landmark PERMIT ISSUED WITH REQUIREMENTS ☐ Does Not Require Review □ Requires Review Action: CERTIFICATION □ Appoved □ Approved with Conditions 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 □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 5**2**22/00 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE