## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 30 Alba Street Timothy Wooten & Suzan Ranson 874-7587 P81163 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Same Contractor Name: Address: Phone: Gary Selby P.O. Box 8546 Ptld, ME 04104 773-3510 COST OF WORK: Past Use: Proposed Use: PERMIT FEE: 10,000 70.00 3rd fl. renovate bedrm, sitting & bathrms FIRE DEPT. □ Approved INSPECTION: Use Group: Type: 5 ☐ Denied 130C496 Signature: Signature: Zonind Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P/A.D.) 3rd floor renovations of bedrooms, sitting & bathroom Action: Approved Special Zone or Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ 10-6-98 Permit Taken By: Date Applied For: S.P. Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Aistoric Preservation Not in District or Landmark ☐ 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 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, □ Denied 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 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

PHONE:

**CEO DISTRICT** 

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE