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: *** Jonathan Lynch & Amy Thompson *** 773-4654 118 Leland St. 001025 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 118 Leland St. Portland, ME Permit Issued: Contractor Name: Address: Phone: Jonathan Lynch (Owner) COST OF WORK: Proposed Use: PERMIT FEE: SEP 1 4 2000 Past Use: \$ 1,000.00 \$30.00 FIRE DEPT. □ Approved INSPECTION: MUlti Famil Same Use Group: A 2Type: 5/2 ☐ Denied CBL: BUCA99 134-F-009 Signature: Signature: Zoning Approva PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved Special Zone or Reviews: Approved with Conditions: 1 story addition, 9 x 11, shed roof located off rear of building ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: Gayle September 12, 2000 GG Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use 3. 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 Historic 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 □ 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 September 12, 2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE: WITH REQUIREMENTS

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