## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: 771–1900 Owner: Permit No: \*\*\* JAMES YORKE \*\*\* 79 CLINTON ST Lessee/Buyer's Name: Phone: BusinessName: Owner Address: SAA Permit Issued: Phone: Contractor Name: Address: MICHEAL DAVIS 563-3375 n PERMIT FEE: COST OF WORK: Past Use: Proposed Use: \$ 2,447. \$ 42.00 **FIRE DEPT.** □ Approved INSPECTION: 2 UNIT SAME Use Group A 3 Type: 50 ☐ Denied Zone: CBL: 136-B-004 BOCA 94 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews REPAIR FRONT PORCH AND STEPS ETC Approved with Conditions: ☐ Shoreland A\A Denied □ Wetland · ☐ Flood Zon'e □ Subdivision Signature: Date: ☐ Site Plan mai Permit Taken By: Date Applied For: K NOV 22 2000 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. ☐ 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 NOV 22 2000 K SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

PHONE:

**CEO DISTRICT** 

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE