				PERMIT IS	SUED	
City of Portland, Maine 389 Congress Street, 04101	•			Issue Date:	CBL: 20017001	
Location of Construction:	Owner Name:		Owner Address:		Hhone:	
14 Walton St	Desmond Kath	Desmond Kathleen		14 Walton St. OF PORTLAND 352		
Business Name: Contractor Nat			Contractor Address: Pnone			
		no contractor / self		Portland		
Lessee/Buyer's Name	Phone:		Permit Type: Garages - Detac	hed	Zone:	
Past Use: Proposed Use:			Permit Fee:	Cost of Work:	CEO District:	
Single Family Home	l -	Same with 16' X 24' Detatched Garage		\$0.00		
	Garage			FIRE DEPT: Approved INSPECTION: Use Group: Type: 55 Signature: Signature: Mung PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
				Tremed	- MA 1999	
			J N/M BUCA 1111			
Proposed Project Description:			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	'	-Min	
16' X 24' Detatched Garage	Signature: Signature: /////					
		PEDESTRIAN ACT	TIVITIES DISTRICT (P.A.D.)			
			Action: Appro	Approved Approved Conditions Denied		
·		Signature:			Date:	
Permit Taken By: Date Applied For:		T .	Zoning Approval			
mjn	04/01/2002		Zomi			
1. This permit application do	oes not preclude the	Special Zone or Rev	iews Zon	ing Appeal	Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland	☐ Variance		Not in District or Landmar	
2. Building permits do not include plumbing, septic or electrical work.		Wetland	Miscellaneous		Does Not Require Review	
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work		☐ Flood Zone	Conditional Use		Requires Review	
		Subdivision	[Interpretation		Approved	
		Site Plan	Approv	ved	Approved w/Conditions	
		Maj Minor Mi	M Denied	//	Denied	
		Date: 6///6	2 Date: 4/	1/02	Date: 4/1/02	
		/ /	/	/	, ,	
		CERTIFICAT	ION			
I hereby certify that I am the ov	wner of record of the na	med property, or that	the proposed work i	is authorized by t	he owner of record and that	
I have been authorized by the o	owner to make this appli	ication as his authorize	ed agent and I agree	to conform to all	l applicable laws of this	
jurisdiction. In addition, if a poshall have the authority to enter	ermit for work described	d in the application is	issued, I certify that	the code official	's authorized representative	
such permit.	i all aleas covered by st	ich permit at any reast	madie nour to emoi	ce the provision	of the code(s) applicable to	
•						
SIGNATURE OF APPLICANT		ADDRE	SS	DATE	PHONE	
RESPONSIBLE PERSON IN CHAR		DATE	PHONE			

4/3/37 Illock Frep. -The angulated of John - Just Carles

E liver out - Counce has purchase = Trans from whether see our bound of whitee 1/16/08 - work has been completed and Na issurs seen. Jan pa Che aut