

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 231 Clifton St		Owner: **** Mark Fernandez	Phone: W: 774-0022 *** 773-3432	Permit No: 001136
Owner Address: 231 Clifton St		Lessee/Buyer's Name:	Phone:	
Contractor Name: H Strang		Address: 267 Warren Ave 04103		Permit Issued:
Past Use: Single Family	Proposed Use: Single Family	COST OF WORK: \$ 19,259.00	PERMIT FEE: \$ 144.00	
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group <i>R-3</i> Type <i>573</i> <i>BOCA94</i> Signature: <i>[Signature]</i>	
Proposed Project Description: Kitchen Remodel		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied		Zone: CBL : 139-G-007 Zoning Approval: <i>OK with conditions</i> <i>10/10/00</i>
Permit Taken By: Gayle		Date Applied For: October 3, 2000 GG		

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
 2. Building permits do not include plumbing, septic or electrical work.
 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..

CERTIFICATION

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, 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

SIGNATURE OF APPLICANT	ADDRESS:	DATE: October 3, 2000	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

CEO DISTRICT 2