City of Portland, Maine - B	Building or Use	Permit Applica	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Te	el: (207) 874-8703	s, Fax: (207) 874-8	8716	2014-01242		158 A012001
Location of Construction: 45 BROOKSIDE RD			CARI BYRNES 45 BROME 04		D PORTLANI	Phone: (207) 939-9639
Business Name:						
Lessee/Buyer's Name Phone:		Permit T			Esmile	Zone:
Past Use:	Proposed Use:	Proposed Use:		litions - Single it Fee:	Cost of Work:	CEO District:
Single Family		Same: Single Family		\$4,220.00 \$420,0		
		INSPECTION:				
Proposed Project Description: Renovation of existing home. Ne	w interior & exterio	or Master suite				
added to existing second floor with	n. Also add 12' x PEDESTRIAN ACTIVITIES DIST		EDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
28' rear deck				Approved w/Conditions Denied		
		Signature:			Date:	
·	By: Date Applied For: 06/09/2014		Zoning Approval			
This permit application does not preclude the		Special Zone or Reviews		Zoni	ing Appeal	Historic Preservation
Applicant(s) from meeting ap Federal Rules.				☐ Variance		Not in District or Landmar
2. Building permits do not incluse septic or electrical work.	Wetland		Miscell	aneous	Does Not Require Review	
3. Building permits are void if within six (6) months of the contract of the c	Flood Zone		Conditi	ional Use	Requires Review	
False information may invalid permit and stop all work	Subdivision		Interpre	etation	Approved	
	Site Plan		Approv	ved	Approved w/Conditions	
	Maj Minor MM		Denied		Denied	
	Date:		Date:		Date:	
I hereby certify that I am the owner I have been authorized by the own jurisdiction. In addition, if a permishall have the authority to enter all such permit.	er to make this appl it for work describe	lication as his authord in the application	hat the orized a oris issu	proposed work gent and I agree ed, I certify tha	e to conform to t the code offic	all applicable laws of this ial's authorized representative
SIGNATURE OF APPLICANT	ADDRESS			DATE	PHONE	
RESPONSIBLE PERSON IN CHARGE (OF WORK, TITLE				DATE	PHONE