Cit	y of Portland, Maine	- Build	ing or Use Pe	ermit A	Application		Permit No:	Issue Dat	e:	CBL:	
389	Congress Street, 04101	Tel: (2	07) 874-8703,	Fax: (2	207) 874-8716		06-0883			167 D00	7001
Location of Construction: Owner Na			Owner Name:	e:		Owner Address:			Phone:		
10 JOHANSEN ST			RICE JONATHAN RICHARDSON			10 JOHANSON ST					
Business Name:			Contractor Nam	ne:		Co	ntractor Address	s:		Phone	
			Brad Rice			3 Bettys Lane Stonington			207367234	2	
Lessee/Buyer's Name			Phone:			Per	Permit Type:		·	Zone:	
						Α	Additions - Dwellings				
Past	t Use:		Proposed Use:			Permit Fee:		Cost of Wo	rk:	: CEO District:	
Sin	gle Family Home		Single Family I	Home/build a 6' x 8'		\$39.00		\$2,0	00.00	) 4	
, and the second				g door, and change garage to a slider				Approved Use Gro		CTION:	
			out window in							roup:	Type
						_					
	posed Project Description:										
	ild a 6' x 8' Deck w/ sliding	g door, an	d change out wi	ndow ii	n garage to a	Signature:		Signature:			
slic	der					PEDESTRIAN ACTIVITIES DISTRIC			TRICT (	T (P.A.D.)	
						Action: Approved Approved			proved w	d w/Condition Denied	
										Date:	
D		D-4- A-				Signature:				Date.	
	mit Taken By:	06/19/	pplied For: /2006			Zoning Approval					
				Special Zone or Revie		ews	ews Zoning Appeal			Historic Preservation	
1.	This permit application			l <u> </u>		ic ws	_			_	
Applicant(s) from meeting applicabe Federal Rules.		able State and	Shoreland		Variance			Not in District or Landma			
2.	Building permits do not include plumbing, septic or electrical work.			Wetland		☐ Miscella	Miscellaneous		☐ Does Not Require Revie		
3	<ul><li>3. Building permits are void if work is not started within six (6) months of the date of issuance.</li></ul>			☐ Flood Zon			☐ Conditional Us			Requires Review	
٥.											
False information may invalidate a building permit and stop all work			☐ Subdivision ☐ Site Plan			☐ Interpretatio			Approved		
					-						
						Approved			Approved w/Condition		
			Maj □ Minor□ MM□			□ □ Denied			☐ Denied		
				Maj Milloi Mill		Ш	Defiled		Demed		
				Date:			Data		D	Date:	
Date:							Date:		ען	ate.	
I ha juris shal	reby certify that I am the development and the lead to be the sdiction. In addition, if a pull have the authority to enduch permit.	owner to permit for	make this appli work described	med procation a	as his authorized application is is	ne p d ag sued	ent and I agree to the state of	to conform to ne code offic	to all ap cial's au	oplicable laws of othorized repres	of this sentative
SIG	SNATURE OF APPLICAN				ADDRES	S		DATE	3	Pl	НО

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Constituction	. Owner Name.	Owner Name.		i none.			
10 JOHANSEN ST	RICE JONATHAN	RICHARDSON	10 JOHANSON ST				
Business Name:	Contractor Name:		Contractor Address:	Phone			
	Brad Rice	Brad Rice		on 20736723	2073672342		
Lessee/Buyer's Name	Phone:	Phone:		<u>.</u>	Zone:		
			Additions - Dwellings				
<b>Dept:</b> Zoning	Status: Approved with Condi	tions Reviewer	: Ann Machado	<b>Approval Date:</b> 0'	7/06/2006		
Note: Ok to Issue: ✓							
1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.							

Owner Address

**Reviewer:** Tammy Munson

Phone

07/28/2006

Ok to Issue:

**Approval Date:** 

1) As discussed, the maximum riser height allowed is 7-3/4".

Owner Name

**Status:** Approved with Conditions

Location of Construction

Building

Dept:

Note:

## 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
DESDONSIDI E DEDSON IN CHARCE OF WORK TIT	DATE	DITO	