City of Portland, Maine - Bu 389 Congress Street, 04101 Tel: Location of Construction: 252 Concord St W	(207) 874-8703 Owner Name: MCKOWN R	, Fax: (207) 874-8	716	2014-00508 r Address:		175 C004001 Phone:
	MCKOWN R	YAN	Owne	r Address:	•	Phone
252 Concord St W		YAN				i nonc.
252 Concord St W MCKOWN R		YAN 252 CC 04103			PORTLAND,	ME (603) 986-4905
Business Name: Contractor		or Name:		Contractor Address:		Phone
		ME				
Lessee/Buyer's Name	Phone:	Phone:		t Type:	Zone:	
			Alterations - Two Family			R5
Past Use: Proposed Use:		Permit F		it Fee:	Cost of Work:	CEO District:
2 Family 2 Family				\$120.00	\$10,000	0.00 7
			INSPI	ECTION:		
Proposed Project Description:						
Renovate thrid floor bathroom inclu	d electrical PEDESTRIAN ACTIV		CORPLANA CORPUT	DIANA CONVITOUR DICEPTOTO (D.A. D.)		
			TTIES DISTRICT (P.A.D.)			
			ction: Appro	ved Approved	w/Conditions Denied Date:	
Permit Taken By: Date A	I					
bjs 03/1			Zoning	g Approval		
This permit application does not preclude the		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Variano	ee	Not in District or Landman
2. Building permits do not include septic or electrical work.	☐ Wetland		Miscell	aneous	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		Conditi	onal Use	Requires Review
		Subdivision		Interpre	etation	Approved
		Site Plan		Approv	ed	Approved w/Conditions
	Maj Minor MM		Denied		Denied	
		Date:		Date:		Date:
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit shall have the authority to enter all as such permit.	to make this appl for work describe	ication as his authored in the application	at the rized a is issu	proposed work gent and I agree ed, I certify tha	e to conform to al t the code official	l applicable laws of this I's authorized representative
SIGNATURE OF APPLICANT		ADDF	RESS		DATE	PHONE