Cit	y of Portland, Ma	ine - Buil	ding or Use l	Permi	t Application	n   P	ermit No:	Issue Date	:	CBL:	
389	Congress Street, 04	101 Tel: (2	207) 874-8703	, Fax: (	(207) 874-871	6	10-0529			176 B0	03001
Location of Construction: Owner Name:				-		Owner Address:				Phone:	
461	1 WOODFORD ST		RUTTER ELLEN M			461 WOODFORD ST					
Busi	ness Name:		Contractor Name:			Cont	tractor Address:			Phone	
			Acanthus Building / Gary Shank			15 Oak Street South Portland			20776729	934	
Less	ee/Buyer's Name		Phone:			Permit Type:				Zone:	
						Ad	lditions - Dwe	llings			
Past	Use:		Proposed Use:			Permit Fee: Cost of Work:		k:	CEO District:		
Sin	igle Family Home		Single Family	Home - install a 9.75		\$50.00		\$2,52	24.00	3	
			x 9.6 Deck		FIRE DEPT: Approved INS		INSPE	SPECTION:			
								Denied	Use G	roup:	Type:
_	oosed Project Description:										
ins	tall a 9.75 x 9.6 Deck							Signatu			
						PEDESTRIAN ACTIVITIES DISTRICT  Action: Approved Approved Approved			TRICT (	(P.A.D.) w/Conditions Denied	
									proved w		
						C: an				Date:	
D	. 4 T. I D	In	P. DE	<del></del>		Signature:				Date.	
	nit Taken By:	_	oplied For:			Zoning Approval					
	ldobson 05/17/2010			Sne	Special Zone or Review		vs Zoning Appeal			Historic Preservation	
1.	This permit application		•	Special Zone of Kevic		***5				<u> </u>	
	Applicant(s) from meeting applicable State Federal Rules.		cable State and	Shoreland			☐ Variance			Not in District or Landmark	
2.	Building permits do not include plumbing, septic or electrical work.		plumbing,	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		
			a building	a building Subdivision  Site Plan			Interpretation [		Approved	Approved	
						Approved			Approved w/Conditions		
				Maj Minor MM [			Denied			Denied	
				Date:			Date:		D	Date:	
that this repr	reby certify that I am to I have been authorized jurisdiction. In addition resentative shall have the e(s) applicable to such	d by the own on, if a perm he authority	ner to make this nit for work desc	amed pr applica cribed in	tion as his authon the application	he prorized	d agent and I assued, I certify	agree to con that the co	form to de offic	all applicable aial's authorized	laws of
	· / 11	•									
SIG	NATURE OF APPLICANT	ı			ADDRES	S		DATE	]	PHO	NE NE

Location of Construction:	Owner Name:		Owner Address:	Phone:	Phone:	
461 WOODFORD ST RUTTER ELLEN M			461 WOODFORD ST			
Business Name: Contractor Name:			Contractor Address:	Phone		
	Acanthus Building / Gary Shank		15 Oak Street South Portland	20776729	2077672934	
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:	
		Additions - Dwellings				

**Dept:** Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 05/20/2010 **Note:** • Ok to Issue: ✓

- 1) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 2) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval. It is understood that 461 is half of a duplex where 459 is also a single family dwelling
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

 Dept:
 Building
 Status:
 Approved
 Reviewer:
 Tammy Munson
 Approval Date:
 05/28/2010

 Note:
 after the fact permit
 Ok to Issue:
 ✓

## **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 APPLICANT	ADDRESS	DATE	PHONE