

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

Location of Construction: 434 Woodford Street		Owner: Carolyn Fenney		Phone: 774-2757		Permit No: <del>990360</del>
Owner Address: 43 Woodfords Street		Lessee/Buyer's Name:		Phone:	BusinessName: 990360	
Contractor Name: ***Paul J. Cormier Remodeling		Address: P.O. Box 485 Westbrook, ME		Phone: 797-8748		Permit Issued APR 21
Past Use:  2-Family Home		Proposed Use:  Same		COST OF WORK: \$ 15,000		PERMIT FEE: \$ 95.00
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:
				Signature:		Signature:
Proposed Project Description:  Finish off an existing attic (3rd floor) in order to add two additional bedrooms.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: Date:		
Permit Taken By: SP		Date Applied For: 4-14-99				

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..

\*\*\*\*Call for Pick Up 797-8748

**PERMIT ISSUED  
WITH REQUIREMENTS**

## 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

4-14-99

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

## 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: 

CEO DISTRICT

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