City of Portland, M	Iaine - Buil	ding or Use	Permit Applicat	ion	Permit No:	Issue Date:		CBL:
389 Congress Street, 0	04101 Tel: (2	207) 874-8703	Fax: (207) 874-8	716	2014-01478			195 B023001
Location of Construction:		Owner Name:			Owner Address:			Phone:
238 BANCROFT ST		DITROLIO ROCCO S & ELLEN M JTS			238 BANCROFT ST PORTLAND, ME 04102			(207) 221-3461
Business Name: Lessee/Buyer's Name Past Use:		Contractor Name: Ken Wilcox Phone:		Contractor Address: 1575 Washington Ave. Portland ME 04103 Permit Type: Sheds]	Phone:
							E	(207) 329-5768
								Zone: R3
		Proposed Use:			Permit Fee: Cost of Work:			CEO District:
Single-Family Home		Single-Family	Home		\$40.00		1,400.00 6	
				INSPECTION:				
Proposed Project Descriptio For the removal of the		8' (64 SF) shed a	and the installation					
of a new 8' x 8' (64 SF), prefabricated shed.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
		Action: Approved Approved Signature:		ved Approve	pproved w/Conditions Denied Date:			
Permit Taken By: dmc Date Applied For: 07/08/2014				Zoning Approval				
This permit application does not preclude the			Special Zone or Reviews		Zoni	Zoning Appeal		listoric Preservation
Applicant(s) from Federal Rules.			Shoreland		☐ Varianc	☐ Variance ☐		Not in District or Landmar
2. Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscell	scellaneous		Does Not Require Review
3. Building permits a within six (6) month	☐ Flood Zone		Conditi	onal Use	Requires Review			
False information repermit and stop all	Subdivision		Interpre	☐ Interpretation ☐		Approved		
	Site Plan		Approv	Approved		Approved w/Conditions		
	Maj Minor MM		Denied	☐ Denied ☐		Denied		
	Date:		Date:	Date:				
			CERTIFICA	TIOI	N.			
I hereby certify that I an I have been authorized by jurisdiction. In addition shall have the authority such permit.	y the owner to , if a permit fo	o make this appl or work describe	amed property, or the lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to t the code offici	all appli ial's auth	cable laws of this orized representative
SIGNATURE OF APPLICA	ADDRESS			DATE		PHONE		
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE				DATE		PHONE