Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

DECTION

tion;

	w	4

This is to certify that _____DIPHILIPPO MICHAEL A LISA R DIPHILIPPO JTS/Ti line_____has permission to ______1736 sq.ft. Single Family H = w/Atta d Gara

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of buildings and

AT OTIDE MILL RD 45

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and this department.

Apply to Public Works for street line and grade if nature of work requires such information.

fication f insper on muse a nandwar en permit on proceed to be this liding or at there is led or live to the latest the l

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

Permit Number D80650 JED

epting this permit shall comply with all

ctures, and of the application on file in

nances of the City of Portland regulating

OTHER REQUIRED APPROVALS

Fire Dept. ______

Health Dept. _____

Appeal Board _____

Other _____

Department Name

PENALTY FOR REMOVING THIS CARD

Scannes

EXPIRED

City of Portland, Ma	aine - Buil	ding or Use	Permi	t Applicatio	n Pern	nit No:	Issue Date	:	CBL:	_	
389 Congress Street, 04		O				08-0657	19/2/	58	212 A0	005001	
Location of Construction: Owner Name:			Owner Address:		77	Phone:					
0 TIDE MILL RD (*5) DIPHILIPPO		DIPHILIPPO	MICHAEL A & LISA		21 TII	21 TIDE MILL RD			207-831-5100		
Business Name:		Contractor Name: Treeline Development Corp			Contrac	Contractor Address:			Phone 2078315100		
					83 Cobb Ave. Portland						
Lessee/Buyer's Name		Phone:			Permit Type:				•	Zone:	
		L			Singl	e Family				R-2	
Past Use:		Proposed Use:			Permit	Permit Fee: Cost of Work:			CEO District:		
Vacant Land		1736 sq.ft. Single Family Home w/Attached Garage		le Family Home		\$935.00 \$84,000.		00.00	3		
					FIRE DEPT: Approved IN		INSPE	SPECTION:			
						Denied			se Group: O-7 Type: 50		
						Defiled			000 000		
									工机。	×100°7	
Proposed Project Description	:				1				0101011		
1736 sq.ft. Single Family	Home w/At	tached Garage			Signature: Sig		Signatu	gnature: 016 9/30			
					PEDESTRIAN ACTIVITIES DISTRIC			TRICT (CT (P.A.D.)		
					Action:	Appro	ved Ap	proved w	ed w/Conditions Denied		
			1		Signature:				Date:		
Permit Taken By:	1 -	oplied For:			Zoning Approval						
lmd	l .	1/2008	Sno	aiol Zono ou Dovi	Zanina Asasal				Historic Preservation		
1. This permit applicat			Special Zone or Reviews		ews	Zoning Appeal Variance			Not in District or Landman		
Applicant(s) from m	eeting applic	able State and	Sh	☐ Shoreland N							
	Federal Rules.										
2. Building permits do not include plumbing,		olumbing,	☐ Wetland ₩/A			Miscellaneous			Does Not Require Review		
septic or electrical w											
3. Building permits are			Flood Zone Conditional Us			onal Use	Requires Review				
within six (6) months of the date of issuance. False information may invalidate a building			parel 12-zorex		×	5.000					
permit and stop all work			Subdivision			Interpretation		ļ	Approved		
				to Dlan				1	A	/C1:4:	
			Site Plan			Approved			Approved w/Conditions		
			Jog - 0080		ווא	Denied			Denied		
La company and a series and a s						Demed			Demed		
				Maj ☐ Minor ☐ MM ☑ Ok wl condithis Date: 8] 20 08 AZU		Date:			Data:		
			Date: 8	130 30 718V	ζ. [1	Date:			vate:		
	an are										
		on an	C	ERTIFICATI	ON						
I hereby certify that I am t	he owner of	record of the na				sed work is	authorized	hy the	owner of reco	rd and that	
I have been authorized by	the owner to	make this appli	ication a	is his authorized	d agent a	and I agree	to conform	to all ar	owlicable laws	of this	
jurisdiction. In addition, i	f a permit for	r work described	d in the	application is is	ssued, I	certify that	the code of	icial's a	authorized repr	esentative	
shall have the authority to	enter all area	as covered by su	ich pern	nit at any reason	nable ho	ur to enforc	e the provi	sion of	the code(s) ap	plicable to	
such permit.											
SIGNATURE OF APPLICANT			ADDRESS		S	DATE			PHONE		
RESPONSIBLE PERSON IN C	CHARGE OF W	ORK, TITLE					DATE		PHO	NE	

DATE

PHONE