City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Permit Ng: 9 0 43 8 Owner: Phone: 8 Tide Mill Road Mike Cloutier 799-6232 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 122 Clifford Street Contractor Name: Address: Phone: 122 Clifford Street Cloutier Construction 6 1999 **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: \$ 151,000.00 \$775.00 Vacant Single family with attached garage **FIRE DEPT.** □ Approved INSPECTION: Use Group: 13 Type 53 ☐ Denied CBL: 212-A-062 BOCA 96 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (Construct single family with attached garage Action: Approved becial Zone o Approved with Conditions: ☐ Shoreland ▶ Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: Site Plan maj □minor □mm Date Applied For: 04/27/99 Permit Taken By: M.N. Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation ✓ Not in District or Landmark ☐ Does Not Require Review □ Requires Review Action: CERTIFICATION □ Appoved 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 ☐ Approved with Conditions ☐ Denied 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 04/27/99 PHONE: SIGNATURE OF APPLICANT ADDRESS: DATE:

PHONE:

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CEÒ DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE