City of Portland, Ma	ine - Building or Use	Permit Applicat	tion	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04	101 Tel: (207) 874-8703	3, Fax: (207) 874-8	3716	2014-01910		220 B008001	
Location of Construction: Owner N		vner Name:		ner Address:		Phone:	
1 CLIFF ST SILVERM		N FAE	1 CLIFF ST PORTLAND, ME 0410		102 (207) 807-6323		
Business Name:			<u> </u>			I	
Lessee/Buyer's Name	Phone:	Phone: Proposed Use:		it Type:	Zone:		
Past Use:	Proposed User			erations - Single	Cost of Work:	R5 RP RPZ CEO District:	
Single-Family Dwelling	_	Same: Single-Family Dwelling		\$729.00 \$65,0			
Single 1 annly 5 wenning	bunic. bingie			ECTION:	70.00		
Proposed Project Description:			1				
-	of renovations including b						
kitchen, reconstruction of enclosure of part of the ex		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
enerosare or part or the ex	issing deek for a sereened j	or a serection poten (112 of).		Action: Approved Approved w/Conditions Denied			
		Signature:			Date:		
Permit Taken By: dmc		Zoning Approval					
1 This parmit application	Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation		
	on does not preclude the eeting applicable State and	Shoreland		Varianc	ee	Not in District or Landmar	
2. Building permits do a septic or electrical wo			Miscell	aneous	☐ Does Not Require Review		
3. Building permits are within six (6) months			Conditi	onal Use	Requires Review		
False information ma permit and stop all w			☐ Interpre	etation	Approved		
	Site Plan		Approv	ed	Approved w/Conditions		
	Maj Minor MM		Denied		Denied		
	Date:		Date:		Date:		
		CERTIFICA	TION	N			
						the owner of record and that	
	the owner to make this app					all applicable laws of this al's authorized representative	
						on of the code(s) applicable to	
such permit.		1 20 411, 10			F-0.1310	(-) PP-133310 ((
SIGNATURE OF APPLICANT	ADDRESS			DATE	PHONE		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE					DATE	PHONE	