## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 98087 Phone: Owner: Location of Construction: Marilyn Brasier 772-6783 22 Halet St Lessee/Buyer's Name: PERMIT ISSUE Phone: BusinessName: Owner Address: SAA Permit issued: Phone: Address: Contractor Name: AUG - 7 1998 X8780 Marilyn **COST OF WORK:** Proposed Use: **PERMIT FEE:** Past Use: 1,500.00 30.00 \$ \$ **CITY OF POR** INSPECTION: U **FIRE DEPT.** D Approved 1-fam Use Group 13 Type: 5 □ Denied Zone: CBL: 224A-D-003 BOCA96 Signature: Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (E Action: Approved Special Zone or Reviews: Approved with Conditions: $\Box$ Shoreland NReplace/Expand deck Denied □ Wetland Flood Zone □ Subdivision Signature: Date: Site Plan maj Ominor Omm O Permit Taken By: Date Applied For: 07 August 1998 MG Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance 1. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. 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 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 have been Appoved □ 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 Date areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 07 August 1998 PHONE: SIGNATURE OF APPLICANT ADDRESS: DATE: Ż **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: CEO DISTRICT

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

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