## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: Kathleen Routh 772-6051 350 Capisic St. 000573 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: N/Å 350 Capisic St. Permit Issued: Phone: Contractor Name: Address: COST OF WORK: PERMIT FEE: Past Use: Proposed Use: . 3 n \$ 2,300.00 \$ 42.00 porch **FIRE DEPT.** □ Approved INSPECTION: Use Group: R-3 Type: 513 ☐ Denied Zone: CBL: 225-E-009 Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Approved with Conditions: Three season porch, 7 windows, 1 door, no electric or plumbing ☐ Shoreland A Denied □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: KX Mike May 26, 2000 JF Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ 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 □ Approved tion may invalidate a building permit and stop all work... □ Denied PERMIT ISSUED WITH REQUIREMENTS call to pick up 772-6051 Kathleen Routh √Historic Preservation Not in District or Landmark □ Does Not Require Review ☐ Requires Review Action: CERTIFICATION □ Appoved □ Approved with Conditions 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 □ 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 SIGNATURE OF APPLICANT ADDRESS: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: