## 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: (1 264 Terrace Ave. 04104 Joseph Robinson Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Anne Knights PO Box 8464 Portland, ME 04104\*\*\*\*\* \*\*\*\* same Permit Issued: Contractor Name: Phone: Address: 1 2000 Peter Risbaru 767-8349 JUL COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$17000 \$ 126.00 **FIRE DEPT.** □ Approved **INSPECTION:** Single family same Use Group 9-3 Type: 517 ☐ Denied CBL: 262-B-021 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. Approved Action: 32x24 addition (bedroom/living room) Approved with Conditions: □ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: Gay1e June 20, 2000 **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. 2. ☐ Conditional Use 3. 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 **Historic Preservation** Not in District or Landmark Does Not Require Review ☐ Requires Review Action: PERMIT ISSUED 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

**PERMIT ISSUED** 

June 20, 2000 SIGNATURE OF APPLICANT ADDRESS: PHONE: DATE: ( WITH REQUIREMENTS PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector