

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 74 Warwick St		Owner: Thomas & Cecile Brown		Phone: 771-9946		Permit No: 9 8 0 9 6 4	
Owner Address: SAA 04102		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Joseph DiFrancesco		Address: 13 Knight St Ptld, ME		Phone: 878-5723		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED AUG 31 1998 CITY OF PORTLAND </div>	
Past Use: 1-fam		Proposed Use: Same		COST OF WORK: \$ 965.00 PERMIT FEE: \$ 25.00			
Proposed Project Description: Construct Wheelchair Ramp		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		INSPECTION: Use Group: <i>U</i> Type: <i>BCCA 96</i> Signature: <i>Hoffman</i>		Zone: <i>R-3</i> CBL: 275-C-063 - <i>A</i> Zoning Approval: <i>OK - 8/27/98</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: UB		Date Applied For: 21 August 1998					

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

PERMIT ISSUED WITH REQUIREMENTS

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 that I have been 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

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: 24 August 1998 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

CEO DISTRICT 3
MLM