City of Portland, Maine	- Building or Use	Permit Applicat	tion	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-8	3716	2014-01963		284 B032001	
Location of Construction:	Owner Name:	Owner Name:		r Address:	Phone:		
84 DEVON ST	COAKLEY JE	ENNIFER L	82 DEVON ST PORTLAND, ME 04102				
Business Name: Contractor Nam		:	Contractor Address:		Phone:		
	Harmon's Carp	Harmon's Carpentry		Provencher Drive	(207) 671-1853		
essee/Buyer's Name Phone:			Permit Type:		Zone:		
				ditions - Single H	R3		
Past Use:	Proposed Use:	Proposed Use:		it Fee:	Cost of Work:	CEO District:	
Single-Family Dwelling	Same: Single-	Family Dwelling		\$124.00	\$9,400	.00 7	
<b>Proposed Project Description:</b> For the construction of a 12' x	rch at rear of bldg.						
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
			Action: Approved Approved w/Conditions Denied				
			Signature:			Date:	
Permit Taken By: dmc	Date Applied For:           08/29/2014			Zoning Approval			
1. This permit application de	oes not preclude the	Special Zone or Reviews		Zonii	ng Appeal	Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland			e	Not in District or Landmark	
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscella	aneous	Does Not Require Review	
3. Building permits are void within six (6) months of t	Flood Zone		Conditional Use		Requires Review		
False information may invalidate a building permit and stop all work		<ul> <li>Subdivision</li> <li>Site Plan</li> <li>Maj Minor MM </li> </ul>		Interpretation		Approved	
				Approved		Approved w/Conditions	
				Denied		Denied	
		Date:		Date:		Date:	

## 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE DERSON IN CLUADCE OF WORK TITLE		DATE	DUONE