Cit	y of Portland, Maine - Bui	lding or Use	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389	Congress Street, 04101 Tel: (207) 874-8703	Fax: (207) 874-8	3716	2014-00977		284 G012001
Loca	tion of Construction:	Owner Name:	Owne		er Address:		Phone:
52 DENNETT ST		KAY ERIN P & CONOR M SHANKMAN JTS		52 DENNETT ST PORTLAND, ME 04102			ME (603) 767-7951
Busi	ness Name:	Contractor Name	:	Contractor Address:			Phone
				ME			
Less	ee/Buyer's Name	Phone:		Permit Type:			Zone:
		Proposed Use:		Additions - Single Family			R3
	Use: gle Family	Single Family				Cost of Work:	CEO District: 7
SIII	gie rainity	Single Family		INSP	ECTION:	\$2,0	000.00 7
_	osed Project Description:	101 1:1 '1					
	d a 20' x 12' deck to an existing 6' t of work	I be refurbished as	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
part of work							
			Action: Approved		Approv	Approved w/Conditions Denied	
				S	Signature:		Date:
Pern bjs	nit Taken By: Date Ap 05/09		Zoning Approval				
3			Special Zone or R	eviews	Zoni	ing Appeal	Historic Preservation
1.	This permit application does not Applicant(s) from meeting application Federal Rules.		Shoreland		☐ Variano		Not in District or Landmar
2.	Building permits do not include septic or electrical work.	☐ Wetland		Miscell	aneous	Does Not Require Review	
3.	Building permits are void if work within six (6) months of the date	Flood Zone		Conditi	onal Use	Requires Review	
	False information may invalidate permit and stop all work	Subdivision		Interpre	etation	Approved	
			Site Plan		Approv	red	Approved w/Conditions
			Maj Minor MM] Denied		Denied
			Date:		Date:		Date:
			CERTIFICA				
	reby certify that I am the owner of we been authorized by the owner t						
juris	sdiction. In addition, if a permit for	or work describe	ed in the application	is issu	ued, I certify tha	t the code offic	cial's authorized representative
	I have the authority to enter all are permit.	eas covered by s	uch permit at any re	asona	ble hour to enfor	rce the provision	on of the code(s) applicable to
Juci	· F						
SIG	NATURE OF APPLICANT		ADDF	RESS		DATE	PHONE
RES	SPONSIBLE PERSON IN CHARGE OF V	VORK, TITLE				DATE	PHONE