City of Portland, M	Iaine - Bu	ilding or Use I	Permit Applica	tion	Permit No:	Issue Date:		CBL:	
389 Congress Street, (Fax: (207) 874-8	8716	2014-00939			310 F016001			
Location of Construction: Owner Name:				Owne	er Address:	ress:		Phone:	
28 FARNHAM ST		MOHR BERNARD			28 FARNHAM ST PORTLAND, ME 04103			(207) 807-4974	
Business Name:	Contractor Name	Contractor Name:		ractor Address:	Phone				
		Jason Holden holdenbuilding@gmail.com		75 (Olympia Street P				
Lessee/Buyer's Name		Phone:	Phone:		it Type:		Zone:		
D		2 17			Additions - Single Family Permit Fee: Cost of Work:			R3	
Past Use: Single Family		Proposed Use:	Single Family				200 00	CEO District: 8	
		Single Paining	Single Family		\$620.00 \$60,000.00 8 INSPECTION:				
Proposed Project Description	1:			-					
build one story addition									
-				PEDESTRIAN ACTIVITIES DISTRICT			(P.A.D.)		
		Action: Approved Approved w/C							
D " " " D	1	Ü				nte:			
Permit Taken By: ldobson		Zoning Approval							
			Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation	
 This permit application does not preclude Applicant(s) from meeting applicable Sta Federal Rules. 			Shoreland		☐ Variano	☐ Variance [Not in District or Landman	
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscell	Miscellaneous		Does Not Require Review	
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			Flood Zone		Conditi	Conditional Use		Requires Review	
			Subdivision		Interpre	☐ Interpretation ☐		Approved	
			Site Plan		Approv	ed		Approved w/Conditions	
			Maj Minor MM		Denied	☐ Denied		Denied	
			Date:		Date:		Date:		
I hereby certify that I an I have been authorized b jurisdiction. In addition shall have the authority such permit.	y the owner, if a permit	to make this appl for work describe	lication as his authord in the application	nat the orized a	proposed work agent and I agreeded, I certify that	e to conform to t the code offic	all appl cial's aut	licable laws of this horized representative	
SIGNATURE OF APPLICAL	NT		ADD	RESS		DATE		PHONE	