## 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: 842-0162 Martha Bichrest 118 Tucker Ave. 04102 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 04103 Woodworth Ave. Permit Issued: Contractor Name: Address: Phone: Community Builders Scarborough 100 19 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 500,00 \$ 30.00 Same Single Family **FIRE DEPT.** □ Approved INSPECTION: Use Group: \$3 Type 5 ☐ Denied BOCAGO 332-B-016 Signature: Signature: 7 Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (D.A.D.) Action: Approved Special Zone or Reviews Approved with Conditions: □ Shoreland Der mein 00 Erect 6'x14' Pressure Treated Deck Denied □Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: Date Applied For ☐ Site Plan maj Permit Taken By: GD October 12,1999 Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. ☐ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... ☐ Denied Please Call For PICK-UP Pager- 870-6412 KEN Historic Preservation ☑Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS 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 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, ☐ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit October 12,1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: WITH REQUIREMENTS **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: 1 **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector