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

Location of Construction: 54 Buca Run 04103 Owner: ** Todd & Kare:		Doner **	Phone: 797-0968	Permit No:
Owner Address: ** 54 Buca Run 04103 **	Lessee/Buyer's Name:	Phone:	BusinessName:	
Contractor Name: Norman Gagne	Address: One Waterhouse Rd. Gorham 04038 839-6442			Permit Issued:
Past Use:	Proposed Use:	COST OF WORL	K: PERMIT FEE:	
Single Family	Same	\$1,925.00	\$36.00	i
		FIRE DEPT.	Approved INSPECTION: Denied Use Group: A 3Ty	
			BOCA-99	Zone.7 CBL: 336-H-055
		Signature:		er- R-G
Proposed Project Description:		PEDESTRIAN ACTIVITIES DISTRICT (A.D.)		
Erect A 12' x 12' Deck W/Stairs				Special Zone or Reviews:
			Approved with Conditions: Denied	□ □ Shoreland □ □ Wetland
			Benneu	└┘ │ □ Wetland │ □ Flood Zone
		Signature:	Date:	□ Subdivision
Permit Taken By:	Date Applied For:			Site Plan maj 🗆 Site Plan D
GD	GD	March 24,2000		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
2. Building permits do not include plumbing, septic or electrical work.				☐ Miscellaneous □ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				
tion may invalidate a building permit and stop all work.				
				Denied
				Historic Preservation Division District or Landmark Does Not Require Review Requires Review
				Action:
I hereby certify that I am the owner of record	GEDTIELCATION		PERMIT ISSUED	
I hereby certify that I am the owner of record	of the named property, or that the propose	d work is authorized by th	e owney of tecord and that I have	Approved vith Conditions
authorized by the owner to make this applica	ation as his authorized agent and I agree to	o conform to all applicable	e laws of this jurisdiction. In ad	Idition.
if a permit for work described in the applicat	ion is issued, I certify that the code officia	al's authorized representation	we shall have the authority to e	nter all
areas covered by such permit at any reasona	ble hour to enforce the provisions of the o	code(s) applicable to such	permit	Date:
		N 1 0/ 00	00	
		March 24,20		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
			DUONE	
RESPONSIBLE PERSON IN CHARGE OF	WURK, TITLE		PHONE:	CEO DER REPTISUED
Whi	te–Permit Desk Green–Assessor's (Canary–D.P.W. Pink–Pu	blic File Ivory Card-Inspect	tor WITH REQUIREMENTS

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