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

Location of Construction: 134 Saugus St	Owner: Dennis & Ber	nadette Gratto	Phone:	Permit Ng: 81424
Owner Address: 134 Saugus St	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUE
Contractor Name: **Papi & Romano Bldrs, Inc.	Address: P.O.Box 1079 H	Phon Ptld 04104	ne: 797–3381	Permit Issued:
Past Use:	Proposed Use:	COST OF WOR \$ 20,000	RK: PERMIT FEE: \$ 120	DEC 2 1998
1-Fam	Same	FIRE DEPT.		CITY OF PORTLAND
		Signature:	BOCA 96 Signature: Work	Zene: 2 CBL: 337-D-005
Proposed Project Description:			ACTIVITIES DISTRICT (P.A.I	Zoning Approval: 2114
	Action:	Approved	Special Zone or Reviews:	
Construct Addition & Deck		Approved with Conditions:	□ □ Shoreland ↓ Gam Li	
			Denied	U UWetland
		Signature:	Date:	☐ Flood Zone
Permit Taken By:	Date Applied For:		Date.	Site Plan, maj Ominor Omm O
SP	De	ecember 11, 1998		10, 200 64- 1990
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				Zoning Appeal
 Building permits do not include plumbing, septic or electrical work. 				☐ Miscellaneous
				☐ Conditional Use ☐ Interpretation
tion may invalidate a building permit and stop all work				
WITH REQUIREMENTS				Denied
		1	WIT, ERM.	Historic Preservation
TH REQUISED				Not in District or Landmark
VUIREALED				Does Not Require Review
- WENTC				□ Requires Review
				Action:
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				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,				
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 provisions of the code(s) applicable to such permit				Date:
areas covered by such permit at any reasonable	nour to enforce the provisions of the c	ode(s) applicable to such	1 permit	
		D . 1 11	1000	
SIGNATURE OF APPLICANT	ADDRESS:	December 11, DATE:		
RESPONSIBLE PERSON IN CHARGE OF WO		PHONE:		
White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector				