City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 9 8 0 6 5 3 Location of Construction: Owner: Phone: Amy Strum/Albert Cecere 797-6751 36 Newton St Owner Address: Lessee/Buyer's Name: Phone: BusinessName: PERMIT ISSUED SAA 04103 ermit Issued: Contractor Name: Address: Phone: A.C. Carpentry 36 Newton St Ptld, ME 04103 JJN 2 2 1998 COST OF WORK: PERMIT FEE: Proposed Use: Past Use: 12,000.00 80.00 CITY OF PORTLAN FIRE DEPT. Approved INSPECTION: 1-fam Same Use Group: 43 Type 53 □ Denied Zoner CBL: BOCAGE. 337-C-054 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Approved with Conditions: □ Shoreland → New Rear Entry/Bathroom/Deck Denied □Wetland ☐ Flood Zone □ Subdivision A\A 1 Signature: Date: ☐ Site Plan mai Permit Taken By: Date Applied For: SP 15 June 1998 Zonina Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied **Historic Preservation** □ Not in District or Landmark Does Not Require Review □ Requires Review Action: **CERTIFICATION** ☐ Appoved ☐ Approved with Conditions 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 □ Denied 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 15 June 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CEO DISTRICT

PHONE:

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