City of Portland, Maine - Buil	ding or Use l	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel: (2			2014-01656		347 C034001	
Location of Construction:	· , ,	Owner Address:		•	Phone:	
10 SKYLARK RD BAILEY KAR		REN J 18 SK 04103			PORTLAND, N	ME (207) 838-9996
Business Name: Contractor Name S.W. Construction		:	Contr	Contractor Address:		Phone:
		etion, Inc. 6 Fox I		x Hall Road Fal	mouth ME 0410	05 (207) 751-3817
Lessee/Buyer's Name Phone:			Permit Type:		Zone:	
			Additions - Single Family			R3
Past Use: Proposed Use:		Permit		it Fee:	Cost of Work:	CEO District:
Single-Family Home Same: Sing		Family Home		\$1,521.00	\$136,208	8.50 8
Proposed Project Description:				ECTION:		
For the construction of a 14' x 24' (33	6 CE) living roo	om addition with				
full unfinished basement, a mud roor		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
(936 SF), attached, three- (3-) bay gar				d w/Conditions Denied		
			S	gnature:		Date:
dmc Date Applied For: 07/28/2014			Zoning Approval			
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zonii	ng Appeal	Historic Preservation
		Shoreland		☐ Variance	e	Not in District or Landmar
2. Building permits do not include presentic or electrical work.	Wetland		☐ Miscella	nneous	Does Not Require Review	
3. Building permits are void if work within six (6) months of the date	Flood Zone		Condition Condition	onal Use	Requires Review	
False information may invalidate permit and stop all work	Subdivision		Interpre	tation	Approved	
	Site Plan		Approve	ed	Approved w/Conditions	
	Maj Minor MM		Denied		Denied	
		Date:		Date:		Date:
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit fo shall have the authority to enter all are such permit.	o make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work in gent and I agreed ted, I certify that	to conform to a the code officia	ll applicable laws of this l's authorized representative
SIGNATURE OF APPLICANT		ADDI	RESS		DATE	PHONE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE