<b>City of Portland, Maine - Building or Use Permit Application</b> 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716				Р	Permit No: Issue Date: 09-0832		CBL: 347 E003	CBL: 347 E003001		
Location of Construction:Owner Name:39 SKYLARK RDSHAW ROBER		RT E & STEPHANIE L		Owner Address: 39 SKYLARK RD			<b>Phone:</b> 207-831-7914			
Business Name: Contractor Nam David Dipietro				Contractor Address: 221 Virginia Street Portland				<b>Phone</b> 2078317914		
Lessee/Buyer's Name Phone:				<b>Permit Type:</b> Additions - Dwellings				Zone:		
Rear Stairs, F		Single Family	Home - Construct at Sono Tubes under , Put Railings on the		Per	mit Fee: \$30.00	Cost of Wo \$7	50.00	CEO District: 5	]
		existing Porch,			FIR	E DEPT:	Approved Denied	INSPEC Use Gro		Туре
Proposed Project Description: Construct Rear Stairs, Put Sono Tubes under existing I on the Front Stairs			Porch, ]	Put Railings	Signature: Sigr PEDESTRIAN ACTIVITIES DISTRIC Action Approved Approved				Г (Р.А.Д.)	
					Signature:				Date:	
Permit Taken By:Date Applied For:Imd08/05/2009				Zoning Approval						
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> </ol>		Special Zone or Reviews		Zoning Appeal			Historic Preservation			
		Shoreland		Uariance			Not in District or Landma			
2. Building permits do not include plumbing, septic or electrical work.			U Wetland		Miscellaneous			Does Not Require Revie		
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work			Flood Zon			Conditional Us			Requires Review	
			Subdivision		Interpretatio			Approved		
			🗌 Si	te Plan		Approv	ed		Approved w/	Condition
		Maj 🗌 Mino 🗌 MM 🗌		Denied			Denied			
			Date:			Date:		Da	ate:	

## 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 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT	DATE	РНО	

Location of Construction:	Owner Name:	Owner Name:		Р	Phone:	
39 SKYLARK RD	SHAW ROBERT E & S	STEPHANIE L	39 SKYLARK RD		207-831-7914	
Business Name:	Contractor Name:	Contractor Name: David Dipietro		Р	<b>Phone</b> 2078317914	
	David Dipietro			land 2		
Lessee/Buyer's Name	Phone:	Phone:		Permit Type:		
			Additions - Dwellings			
Dept: Zoning S	tatus: Approved with Condition	s <b>Reviewer</b>	Marge Schmuckal	Approval Date:	08/18/2009	
Note:			C	0	k to Issue: 🔽	
1) Separate permits shall be	e required for future decks, sheds	pools and/or a	varages			
	-					
	for an additional dwelling unit. Stoves, microwaves, refrigerators		-		cluding, but not	
3) This property shall remain approval.	in a single family dwelling. Any c	hange of use sh	all require a separate per	mit application for	review and	
<ol> <li>This permit is being app work.</li> </ol>	roved on the basis of plans subm	tted. Any devi	ations shall require a sep	parate approval bef	ore starting that	
Dept: Building S	tatus: Approved with Condition	s Reviewer	: Tammy Munson	Approval Date:	08/21/2009	
Note:				0	k to Issue: 🗹	
1) Application approval bas	sed upon information provided by	applicant. Any	v deviation from approve	ed plans requires se	parate review	

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