City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: 12 Coolidge Avenue Owner: Phone: Permit No: Dung Huynh 000445 Lessee/Buyer's Name: Phone: Owner Address: BusinessName: SAA Permit Issued: Phone: *** Leo 282-7697 Contractor Name: Address: 19 Industrial RD. Saco # PM COnstruction Co. COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 102.00 \$13,000 same single family **FIRE DEPT.** □ Approved INSPECTION: Use Group R-3Type:5 ☐ Denied BOCA 99 CBL: Zone 347-E-018 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (A.A.D.) Action: Approved 12x16 addition to right side of house Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone Date: □ Subdivision Signature: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: May 2, 00 UNA Zoning 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 ☐ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work... ☐ Denied ✓ Aistoric Preservation Not in District or Landmark PLEASE CALL WHEN READY LEO #### 282-7696 ☐ Does Not Require Review ☐ Requires Review Action: PERMIT ISSUED CERTIFICATION ☐ Appoved 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 ☐ Approved with Condition ☐ 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit SIGNATURE OF APPLICANT ADDRESS: PHONE: WITH REQUIREME

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

PHONE:

CEO DISTRICT

NW

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE