Cit	ty of Portland, Main	ne - Building or Use	Permit Applicat	tion	Permit No:	<b>Issue Date:</b>		CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 8					2014-01557			348 C018001	
Loc	ation of Construction:	Owner Name:		Owner Address:				Phone:	
4 COOLIDGE AVE		BLACK ARL	BLACK ARLENE B		4 COOLIDGE AVE PORTLAND, N 04103		, ME	(207) 797-7025	
Bus	iness Name:			1				ı	
Less	see/Buyer's Name	Phone:			Permit Type:  Alterations - Single Family  Permit Fee: Cost of Work:			Zone:	
D	t Use:	D						R3 CEO District:	
	ngle Family Home	Proposed Use:	Single Family Home				300.00 8		
		Single 1 mining			INSPECTION:				
	posed Project Description:	as to front of house							
AC	ld 4' x 8' landing with ste	eps to front of nouse.		PEDESTRIAN ACTIVITIES		TIFS DISTRICT	DISTRICT (P A D )		
			Action: Approved Signature:			Approved w/Conditions Denied			
	. =	I			gnature:		te:		
_	mit Taken By: nc	Date Applied For: 07/16/2014		Zoning Approval					
1.	This permit application		Special Zone or Reviews		Zoni	Zoning Appeal  Variance		Historic Preservation	
Applicant(s) from meeting applic Federal Rules.			Shoreland		☐ Variance			Not in District or Landmar	
2.	Building permits do no septic or electrical wor		lumbing,		Miscell:	Miscellaneous		Does Not Require Review	
3.	Building permits are void if work is not started within six (6) months of the date of issuance.		Flood Zone		Condition	Conditional Use		Requires Review	
	False information may permit and stop all wor	_	☐ Subdivision ☐ Site Plan		Interpre	☐ Interpretation ☐ Approved ☐		Approved	
					Approv			Approved w/Conditions	
			Maj Minor MM		_ Denied	☐ Denied		Denied	
			Date:		Date:	Date:		Date:	
I ha juri sha	we been authorized by the sdiction. In addition, if a	e owner of record of the ne owner to make this appa permit for work describenter all areas covered by s	lication as his authored in the application	at the rized a is issu	proposed work gent and I agree ed, I certify that	e to conform to t the code offici	all appl ial's aut	licable laws of this horized representative	
SIGNATURE OF APPLICANT			ADDRESS			DATE		PHONE	