

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-0359	Issue Date:	CBL: 352 C004001
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Location of Construction: 11 Continental Dr	Owner Name: Dipietro Anthony J &	Owner Address: 20 Continental Dr	Phone: 207-878-1338
Business Name: N/A	Contractor Name: n/a	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name: N/A	Phone: N/A	Permit Type: Additions - Dwellings	Zone:

Past Use: Single Family	Proposed Use: Single Family / Adding 20' x 24' one car attached garage. Foundation already exists.	Permit Fee: \$72.00	Cost of Work: \$7,000.00	CEO District: 2
Proposed Project Description: Adding 20' x 24' one car attached garage.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
		Signature:	Date:	

Permit Taken By: gg	Date Applied For: 04/18/2003	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Ma <input type="checkbox"/> Mino <input type="checkbox"/> M <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretati <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied
	Date:	Date:	Date:

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

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO

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Dept: Zoning	Status: Approved	Reviewer: Tammy Munson	Approval Date: 04/29/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Tammy Munson	Approval Date: 04/29/2003
Note:			Ok to Issue: <input checked="" type="checkbox"/>

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