

Location of Construction: 48 West Lynne Ave. Portland, ME		Owner: Richard & Carlene McCarthy		Phone: 797-6307	Permit No: 990260
Owner Address: SAA		Lessee/Buyer's Name:		Phone:	BusinessName:
Contractor Name: ***David Dardano		Address: 38 West Lynne Ave. Portland, ME		Phone: 878-3922	
Past Use: 1-Family		Proposed Use: Same		COST OF WORK: \$ 4,800.00	PERMIT FEE: \$ 45.00
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: A3 Type: 53 00C496 Signature: <i>[Signature]</i>
Proposed Project Description: Build a 12 x 12 sun porch, to be enclosed and built on existing deck.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied	Signature: _____ Date: _____
Permit Taken By: ub		Date Applied For: 3/24/99			

PERMIT ISSUED
MAR 25 1999
CITY OF PORTLAND

Zone: **R-2** CBL: 353-C-012
Zoning Approval: *[Signature]* 3/25/99
Special Zone of Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
Date: *[Signature]*

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

3-24-99

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

CEO DISTRICT 1