

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 394 Palmer Ave, Portland ME 04103		Owner: James Piacentini		Phone: 831-9808		Permit No: 000535
Owner Address: 394 Palmer Ave, Portland ME 04103		Lessee/Buyer's Name: N/A		Phone:		
Contractor Name: * James Piacentini		Address: 9 Grafton St, Portland, ME 04103		Phone:		COST OF WORK: \$ 1000.00 PERMIT FEE: \$ 30.00 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group A-3 Type 5B Signature: <i>Hoffman</i> Signature: <i>Hoffman</i>
Past Use: Single Family Dwelling		Proposed Use: SAME		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		
Proposed Project Description: Build 10 x 12 deck Amend Permit # 000055						
Permit Taken By: MN		Date Applied For: NC 5/19/00				

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..

MAIL TO: James Piacentini
9 Grafton Street
Portland, ME 04103

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

SIGNATURE OF APPLICANT	ADDRESS:	DATE: 5/19/00	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

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: _____

PERMIT ISSUED
CEO, DISTRICTS 2
WITH REQUIREMENTS