	y of Portland, Ma Congress Street, 04		0			P	09-1231	Issue Dat	e:	273 D0	02001	
Location of Construction: Owner Name:							Owner Address:			Phone:		
	7 Taft Ave		Cyr Mary K & Fernard E Jts			137 Taft Ave			207-775-9	207-775-9096		
Bus	iness Name:		Contractor Name: Steve Patterson			Contractor Address:			Phone	Phone		
						17 Patterson Drive Kennebunk			2079854744			
Less	see/Buyer's Name		Phone:	'hone:			mit Type: emolitions - Bui		Zone:			
Pas	t Use:		Proposed Use:					Cost of Work: CF		CEO District:		
Sin	igle Family		Single Family /			\$30.00		\$8	\$800.00			
			detached garage.				E DEPT:	Approved		CTION:		
								Denied	Use Gr	coup:	Type	
<u> </u>	1D 1 (D 1)											
	posed Project Descripti					Signatura		Signature:				
Demolition of detached garage.							Signature: PEDESTRIAN ACTIVITIES DISTR					
						Act	ion  Appro	vea Ap	orovea w	/Condition	Denied	
						Sign	nature:			Date:		
Peri	mit Taken By:		pplied For:	Zoning Approval					l			
gg		11/02	2/2009						-			
1.	1 11 1			Special Zone or Revi		ews Zoning Appeal			Historic Preservation			
	Applicant(s) from meeting applicable Federal Rules.		eable State and	☐ Si	noreland		☐ Variance	/ariance		Not in Dist	Not in District or Landn	
2.	Building permits do not include plumbing septic or electrical work.			Wetland			Miscellaneous			☐ Does Not Require Revie		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flood Zon			Conditional Us			Requires Review		
	False information mapermit and stop all w		a building	ilding Subdivision			☐ Interpretatio			Approved		
			Site Plan			Approved			Approved w/Condition			
					Mino MM	Denied			☐ Denied			
				Date:			Date:			Date:		
I ha juri: shal	ereby certify that I am to twe been authorized by sdiction. In addition, i Il have the authority to uch permit.	the owner to f a permit fo	o make this appli r work described	med procession a	as his authorized application is iss	e pro l age ued,	ent and I agree to I certify that the	to conform to code office	to all ap cial's au	pplicable laws athorized repre	of this esentative	
CIC	NATURE OF ARRIVA	т.			ADDRESS			D 4 mr	,			
SIC	GNATURE OF APPLICAN	N			ADDRESS	•		DATE	2	F	ОНО	

Location of Construction:	Owner Name:	Owner Address:								
137 Taft Ave	Cyr Mary K & Fernard E Jts	137 Taft Ave		207-775-909	)6					
Business Name:	Contractor Name:	Contractor Address:		Phone						
	Steve Patterson	17 Patterson Drive Ke	nnebunk	2079854744						
Lessee/Buyer's Name	Phone:	Permit Type:			Zone:					
		Demolitions - Building	5							
Dept: Zoning Status: A	pproved with Conditions R	eviewer: Marge Schmuckal	Approval Dat	te: 11/0	2/2009					
Note:				Ok to Issue:						
	amplition of the avieting games	Compared mannite and magnined			Œ.					
information concerning the rebuild	1) This permit request is ONLY for demolition of the existing garage. Separate permits are required for rebuilding the garage. All information concerning the rebuilding of a garage SHALL be required PRIOR to rebuilding.									
2) Your present structure is legally n										
only have one (1) year to replace it in the same footprint (no expansions), with the same height, and same use. Any of the above shall require that this structure meet the current zoning standards. The one (1) year starts at the time of reshall be the owner's responsibility to contact the Code Enforcement Officer and notify them of that specific date.										
•		·	•							
3) This is NOT an approval for an ad limited to items such as stoves, mi				including, but	t not					
4) This property shall remain a single	e family dwelling. Any change of	of use shall require a separate pe	rmit application fo	or review and	i					
approval.										
Dept: Building Status: Po	ending R	eviewer: Residential Plan Revi	e Approval Dat	te:						
Note:	onung 21			Ok to Issue:	. 🗆					
Tiole.				OR to Issue.	_					
Comments:										
11/5/2009-mes: This permit is for DEM	MO ONLY - Does not say anyth	ing about rebuilding - separate p	ermits SHALL be	required for	the					
rebuilding										
	CERTIF	TCATION								
I hereby certify that I am the owner of										
I have been authorized by the owner to										
jurisdiction. In addition, if a permit for shall have the authority to enter all are										
to such permit.	as covered by such permit at an	iy icasonadic nour to emorce ti	e provision of the	c couc(s) app	neavie					
SIGNATURE OF APPLICAN		ADDRESS	DATE	PHO	 O					
RESPONSIBLE PERSON IN CHARGE OF	WORK, TIT		DATE	PHO	0					