

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

Location of Construction: 84 Bramblewood Dr		Owner: Martin, Kevin & Jayne		Phone:		Permit No: <b>970531</b> <b>PERMIT ISSUED</b>
Owner Address: SAA Ptld, ME 04103		Lessee/Buyer's Name:		Phone: 797-4797		
Contractor Name: Stephen Martin		Address:		Phone:		Zoning: <b>R-2</b> CBL: 378-A-062
Past Use: 1-fam		Proposed Use: Same		COST OF WORK: \$ 1,500.00		
Proposed Project Description: Extend Deck.		Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature: _____ Date: _____		Zoning Approval: <i>dc</i> <b>5/30/97</b> <b>Special Zone or Reviews:</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
Permit Taken By: Mary Gresik		Date Applied For: <del>XXXXXX</del> 29 May 1997				

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..

**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: *Jayne Martin* ADDRESS: Jayne Martin DATE: ~~XXXXXX~~ 29 May 1997 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 **7**  
*K Carroll*