Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application	P	ermit No:	Issue Dat	te:	CBL:	
389	Congress Street, 04101	Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		05-1760			382 A00	9001
Location of Construction: Owner Name:				0		Owr	Owner Address:			Phone:	
			ANDREWS DA	AVID R	& DOUGLAS	417	AUBURN ST	1			
Business Name: Co			Contractor Name:			Contractor Address:			Phone		
			n/a	n/a			n/a Portland				
Less	see/Buyer's Name	Phone:	none:		Permit Type:			1	Zone:		
				Cl		Change of Use - Dwellings					
Past	t Use:		Proposed Use:			Permit Fee: Cost of Work:			ork:	CEO District:	
Coı	mmercial / Bed and Breakt	fast	Single Family	dwelling		\$105.00		\$1	05.00	5	
Single Palliny C			C				Approved	INSPE	PECTION:		
								Denied Use G		roup:	Type
							L	Demed			
Proj	posed Project Description:										
Rev	vert back to single family o	dwelling				Signature: Sig		Signati	gnature:		
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (	T (P.A.D.)	
										I w/Condition ☐ Denied	
						Act	топ. 🔲 Аррго	Ap	proved v	//Condition	Dellied
						Sign	nature:			Date:	
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval					
dn	nartin	12/05	5/2005								
1.	This permit application	does not	preclude the	Spec	ial Zone or Revi	ews	ws Zoning Appeal			Historic Preservation	
	Applicant(s) from meeting applicable Sta Federal Rules.			Shoreland		☐ Variance			☐ Not in District or Landm		
2.	Building permits do not include plumbing, septic or electrical work.		☐ Wetland		Miscellaneous			Does Not Require Revie			
3.	3. Building permits are void if work is not started			☐ Flood Zon			Conditional Us			Requires Review	
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work			☐ Subdivision ☐ Site Plan  Maj ☐ Minor ☐ MM ☐			☐ Interpretatio			Approved		
						☐ Approved			Approved w/Condition		
					☐ Denied			☐ Denied			
				Date:			Date:		Б	Date:	
					CERTIFICATIO	N					
I ha juris shal	reby certify that I am the ove been authorized by the sdiction. In addition, if a pull have the authority to entuch permit.	owner to	o make this appli r work described	cation a	as his authorized application is iss	l age sued,	nt and I agree I certify that t	to conform he code offi	to all ap	oplicable laws of otherized repres	of this sentative
SIG	NATURE OF APPLICAN				ADDRES	S		DATI	Ξ	P	НО

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction:	Owner Name:		Owner Address:	Phone:		
417 AUBURN ST	ANDREWS DAVID R	& DOUGLAS	417 AUBURN ST			
Business Name:	Contractor Name:		Contractor Address:		Phone	
	n/a		n/a Portland			
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:
			Change of Use - Dwe	llings		
Dept: Zoning Status: A	approved with Condition	s <b>Reviewer</b>	: Ann Machado	Approval Date	e: 12/	07/2005
Note:					Ok to Issue	: <b>V</b>
<ol> <li>This property shall become a sing approval.</li> <li>This change of use permit extingular.</li> </ol>		· ·		**	or review a	nd
approval.  2) This change of use permit extings		ght to have a be	ed and breakfast at this	**		nd 15/2005
approval.  2) This change of use permit extings	uishes any future legal ri	ght to have a be	ed and breakfast at this	property.  Approval Date		15/2005

## **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	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO