City of Portland, M	Iaine -	Building or Use 1	Permit Applica	tion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-					2013-01932			384 A007001	
Location of Construction: Owner Name:				Owne	r Address:			Phone:	
436 AUBURN ST		BONNIE KEN	BONNIE KENT		436 AUBURN STREET PORTLAND ME 04038				
Business Name:		Contractor Name	Contractor Name:		Contractor Address:			Phone	
		Dodge Oil service@dodg	Dodge Oil service@dodgeoil.com		79 New Portland Road Gorham ME 04038			(207) 839-5536	
Lessee/Buyer's Name		Phone:	Phone:		Permit Type: HVAC			Zone: R3	
Past Use:		Proposed Use:	Proposed Use:		ermit Fee: Cost of Work:			CEO District:	
Single Family		Single Family	Single Family		\$30.00 ECTION:	· ·		8	
December 1 December 1									
Proposed Project Description Installing 3 new 100 ga		tanke							
mistaning 5 new 100 ga		PEDESTRIAN ACTIVITIES DISTRICT (P.A.)			(P.A.D.)				
		Action: Approved Approved w/0				nditions Denied			
	Signature:				Date:				
Permit Taken By: bjs					Zoning Approval				
This permit application does not preclude the			Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation	
	applicable State and			☐ Variance		Not in District or Landmar			
2. Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscell	cellaneous		Does Not Require Review	
3. Building permits are void if work is not st within six (6) months of the date of issuan False information may invalidate a building			Flood Zone		Conditi	Conditional Use		Requires Review	
False information in permit and stop all	lidate a building	Subdivision		Interpre	etation		Approved		
			Site Plan		Approv	ed		Approved w/Conditions	
	Maj Minor MM		Denied	_ Denied [Denied			
			Date:		Date:		Date:		
I hereby certify that I an I have been authorized by jurisdiction. In addition shall have the authority such permit.	y the ow , if a peri	rner to make this appl mit for work describe	ication as his authord in the application	hat the orized a is issu	proposed work gent and I agree ed, I certify tha	e to conform to t the code office	all appi cial's aut	licable laws of this horized representative	
SIGNATURE OF APPLICANT			ADDRESS			DATE		PHONE	