City of Portland, Maine - 389 Congress Street, 04101	0		-	rmit No: 09-1326	Issue Date	2:	CBL: 385 A00	5001
Location of Construction: 159 LAMBERT ST	Owner Name: FREDERICKS	JAMES W Owner Address 159 LAMBER					Phone:	
Business Name:	Contractor Nan property owne		Conti	Contractor Address:			Phone	
Lessee/Buyer's Name	Phone:		Perm She	it Type: eds				Zone:
Past Use: Proposed Use: Single Family Home Single Family Shed Shed		Home - install a 8' x 8'		nit Fee: \$30.00 DEPT:	Cost of Wo \$3 Approved	35.00 INSPECT		
					Denied	Use Grou	ıp:	Туре
Proposed Project Description: install a 8' x 8' Shed			PEDESTRIAN ACTIVITIES DISTRIC			CT (P.A.D.)		
		Action Approved Approve				ed w/Condition Denied		
Permit Taken By: Ldobson	Date Applied For: 11/18/2009	Zoning Approval						
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Re	views Zoning Appeal]	Historic Preservation		
		Shoreland		Variance			Not in District or Landma	
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous			Does Not Require Revie	
 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 		Flood Zon		Conditional Us			Requires Review	
		Subdivision		Interpretatio			Approved	
		Site Plan		Approv	ed		Approved w/	Condition
		Maj 🗌 Mino 🗌 Ml	M	Denied			Denied	
		Date:		Date:		Date	e:	

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	РНО

Location of Constructio 159 LAMBERT ST	n:	Owner Name: FREDERICKS		Owner Address: 159 LAMBERT ST		Phone:	
Business Name:		Contractor Nam property owne		Contractor Address:		Phone	
Lessee/Buyer's Name		Phone:		Permit Type: Sheds		Zone:	:
Dept: Zoning Note:	Status:	Pending	Reviewer	:	Approval Da	te: Ok to Issue: 🛛	_
Dept: Building Note:	Status:	Pending	Reviewer	: Tom Markley	Approval Da	te: Ok to Issue: 🛛	_

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