Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application]	Permit No:	Issue Dat	te:	CBL:	
389	Congress Street, 04101	Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		04-1329			386A B0	29001
Location of Construction: Owner Name			Owner Name:			Owner Address:			Phone:		
34 Garsoe Dr			Jordan Charlene M &			34 Garsoe Dr					
Business Name:			Contractor Name:			Coı	Contractor Address:			Phone	
			Fredericks Contracting			37 Waterhouse Road Gorham			207839805	50	
Lessee/Buyer's Name Phone:						Permit Type:			- '	Zone:	
						Single Family					
Past	Use:		Proposed Use:			Permit Fee: Cost of Work			ork:	CEO District:	
	gle Family Home		_	Home / Enclose rear		\$174.00			800.00	5	
•			deck to make s			FIRE DEPT:		Approved	INSPEC		
							L T	_	Use Gr		Туре
								Denied		_	
Pro	posed Project Description:		1								
-	close rear deck to make su	n room				Signature: Signature:			Signatu	ignature:	
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (I	<u>c</u>	
						Action: Approved Approved				d w/Condition Denied	
						Signature:				Date:	
Peri	nit Taken By:	Date A	pplied For:				Zonin	g Approva	1		
ldobson 09/07/2004			//2004			Zomig ripprovu					
1.	This permit application does not preclud			Spec	Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation	
Applicant(s) from meeting applicable S Federal Rules.			-	Shoreland			☐ Variance			☐ Not in District or Landm	
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscel	Miscellaneous		☐ Does Not Require Revie		
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			☐ Flood Zon		☐ Condit	Conditional Us		Requires Review			
				Subdivision			☐ Interpretatio			Approved	
			Site Plan			☐ Approved			Approved w/Condition		
				Maj Minor MM			Denied			☐ Denied	
				Date:	Date:		Date:		Da	Date:	
I ha juris shal	reby certify that I am the over the second authorized by the selection. In addition, if a pull have the authority to entuch permit.	owner to ermit fo	o make this appli r work described	med procation a	as his authorized application is is	ne pr d ago	ent and I agree I, I certify that	to conform the code offi	to all ap cial's au	plicable laws of thorized repres	of this sentative
_											
SIG	NATURE OF APPLICAN				ADDRES	S		DATI	Ξ	P	НО

Location of Construction:	Owner Name:	Owner Address:	Phone:	
34 Garsoe Dr Jordan Charlene M &		34 Garsoe Dr		
Business Name:	Contractor Name:	Contractor Address:	Phone	
Fredericks Contracting		37 Waterhouse Road Gorham	2078398050	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
		Single Family		

 Dept:
 Zoning
 Status:
 Approval Date:
 09/15/2004

 Note:
 Ok to Issue:
 ✓

1) Zoning for original deck on permit # 03-0920, sunroom to be built on 12' x 14' section

Dept: Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 09/15/2004

1) Permit approved based on the plans submitted and reviewed w/owner, with additional information as agreed on and as noted on plans. The roof load must be carried by a minimum of 3- 2x12, the contractor must contact this office if the design is changed.

2) Separate permits are required for any electrical, plumbing, or heating.

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	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО