City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: Owner: Milton Silverman 797-6483 34 Patricia Ln Lessee/Buyer's Name: Phone: BusinessName: Owner Address: SAA Permit Issued: Phone: Address: Contractor Name: FEB | 7 1999 ***R. Peter Doughty - General Cont. Serv. 64 Washington Ave So. Ptld 04106 **COST OF WORK:** Proposed Use: PERMIT FEE: Past Use: \$ 50,000 \$ 270.00 **CITY OF PORTL** 1-fam Same w/addition **FIRE DEPT.** □ Approved INSPECTION: Use Group: N-3Type: 5 13 ☐ Denied Zone: CBL: BOCAGE R-Z-387-A-017 Signature: Signature: Zoning Approva Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved Special Zone or Review Approved with Conditions: Construct Addition over Garage ☐ Shoreland Denied □ Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: SP February 3, 1999 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work.. ☐ Denied Historic Preservation In Mot in District or Landmark Does Not Require Review ☐ Requires Review Action: **CERTIFICATION** □ Appoved ☐ Approved with Conditions 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 ☐ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit February 3, 1999 PHONE: SIGNATURE OF APPLICANT ADDRESS: DATE: 2

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE:

Kc/TM

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE