Cit	y of Portland, Maine	e - Build	ling or Use Pe	ermit A	Application	Pe	ermit No:	Issue Dat	e:	CBL:	
	Congress Street, 0410		O				04-0184			392 B02	2001
Location of Construction: Owner Name:				0		Owner Address:			Phone:		
161 Hope Ave Volger Theod			ore J Jr &		1703	5 Washington	Ave				
Business Name: C			Contractor Nam	ne:		Cont	ractor Addres	s:		Phone	
			Paul Volger Ted Volger			1705 Washington Avenue Portland			207797880	00	
Less	see/Buyer's Name		Phone:			Perm	it Type:				Zone:
						Amendment to Single Family					
Past	t Use:		Proposed Use:		<u>-</u>	Permit Fee: Cost of Work:			rk:	CEO District:	1
Single Family/			_	/ Amendment to		\$39.00		\$2,0	00.00	0 5	
	•		Permit #030900 Extend proposed deck 8ft.			FIRE DEPT: Approved  Denied		Approved	INSPE	SPECTION:	
								Use Group: Typ		Type	
Proj	posed Project Description	:	1								
An	nendment to Permit #0309	900 Exten	d proposed deck	8ft.		Signature:		Signatu	Signature:		
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (I	T (P.A.D.)	
						Action: Approved Approved w/Con				/Condition	Denied
										_	
		1					Signature:			Date:	
	mit Taken By:		pplied For:				Zoning	Approva	l		
ld	obson	03/02	/2004							<u></u>	
1.	This permit application		-	Spec	cial Zone or Revi	ews	Zoning Appeal			Historic Preservation	
	Applicant(s) from meeting applicable State an Federal Rules.		able State and	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. Building permits are vowithin six (6) months o					☐ Flood Zon		☐ Conditional Us			Requires Review	
False information may invalidate a building permit and stop all work				Subdivision		☐ Interpretatio			Approved		
			Site Plan			Approved			Approved w/Condition		
				Maj ☐ Minor☐ MM☐			☐ Denied			☐ Denied	
			Date:			Date:		D	Date:		
I ha juris shal	reby certify that I am the ve been authorized by the sdiction. In addition, if a Il have the authority to er uch permit.	e owner to permit fo	o make this appli r work described	med procation a	as his authorized application is iss	e pro agen ued, l	nt and I agree of the state of	to conform t ne code offic	to all ap cial's au	plicable laws of thorized repres	of this sentative
SIG	SNATURE OF APPLICAN				ADDRESS			DATE	3	P	НО

<b>Location of Construction:</b>	Owner Name:	Owner Address:	Phone:	
161 Hope Ave	Volger Theodore J Jr &	1705 Washington Ave		
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Paul Volger Ted Volger	1705 Washington Avenue Portland	2077978800	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
		Amendment to Single Family		

Dept: Note:	Zoning	Status:	Approved	Reviewer:	Tammy Munson	Approval Date: Ok to	03/04/2004 • Issue: 🗹
Dept: Note:	Building	Status:	Approved	Reviewer:	Tammy Munson	Approval Date: Ok to	03/04/2004 • Issue: 🗹

## 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	PHO