City of Portland, Ma		O			Permit No:	Issue Date:	CBL:	
389 Congress Street, 04	101 Tel: (2		, Fax: (207) 874-8		2014-01785		013 B006001	
Location of Construction: 35 E OXFORD ST		Owner Name: DUBON LUIS A & MARINA DUBON JTS		Owner Address: 47 ANDERSON ST PORTLAND, ME 04101			Phone:	
Business Name:		Contractor Name: HAENDEL LAMOUR		Contractor Address: 592 WASHINGTON AVE Portland ME 04103			Phone: d ME (207) 956-2420	
Lessee/Buyer's Name		Phone:		Permit Type: Alterations - Multi Famil		Family	Zone:	
		Proposed Use:		Permit Fee: Cost of Work:			CEO District:	
		Same: 3 Famil	y dwelling	\$80.00			,000.00 1	
Proposed Project Description:					erro.			
	hrick and	siding						
Foundation repair; replace brick and siding. Permit Taken By: bjs Date Applied For: 08/08/2014				PEDESTRIAN ACTIVITIES DISTRICT (P.A.		(P.A.D.)		
				Action: Approved Approved w/Cond			red w/Conditions Denied	
			1				Date:	
					Zoning	Approval		
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation	
			Shoreland		☐ Varianc	e	Not in District or Landmar	
 Building permits do not include plumbing, septic or electrical work. 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 			Wetland		Miscella	Does Not Require Revi		
			Flood Zone		Condition	Conditional Use Requires R		
			Subdivision		Interpre	tation	Approved	
			Site Plan		Approv	ed	Approved w/Conditions	
			Maj Minor MM		Denied		Denied	
			Date:		Date:		Date:	
I have been authorized by jurisdiction. In addition, if	the owner to a permit fo	o make this appl or work describe	lication as his authored in the application	nat the rized a is issu	proposed work gent and I agree ed, I certify that	e to conform to t the code offic	y the owner of record and that all applicable laws of this ial's authorized representative on of the code(s) applicable to	
SIGNATURE OF APPLICANT			ADDI			DATE	PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE