City of Portland, Maine - Bu	uilding or Use Pe	rmit A	Application		Permit No:	Issue Dat	e:	CBL:	
389 Congress Street, 04101 Te	1: (207) 874-8703,	Fax: (2	207) 874-8716		04-1257			400 D00	8001
Location of Construction:	Owner Name:		Owner Address:			Phone:	Phone:		
450 Ray St	Jordan John R				450 Ray St				
Business Name: Contractor Nam		ne:		Contractor Address:			Phone		
	Greg McCorma	ack c/o Pines of Portla		426 Forest Avenue Portland			207671263	1	
Lessee/Buyer's Name Phone:				Permit Type:				Zone:	
				S	ingle Family				
Past Use:	Proposed Use:		<u>-</u>	Pe	rmit Fee:	Cost of Wo	rk:	CEO District:	
vacant land	Single Family a	mend p	ermit # 040657		\$30.00		00.00	0.00 4	
	eliminate bulkl			FII	RE DEPT:	Approved	INSPEC	CTION:	-1
	basement throu	ıgh gar	age, extend			Denied	Use Gro	oup:	Type
	garage					Dellied			
Proposed Project Description:									
eliminate bulkhead, install access	•	n garage, extend		Signature: Sig		Signatur	gnature:		
garage 2 ft forward to make 22 ft w	vide x 24 ft deep.			PEDESTRIAN ACTIVITIES DIST		RICT (P.A.D.)			
				Ac	ction: Appro	ved App	oroved w	Condition	Denied
								_	
			Signatur		nature: I		Date:	Date:	
-	te Applied For:				Zoning	Approva	l		
	8/25/2004	G : 17 P :						Historia Duosannotian	
1. This permit application does		Special Zone or Revie		ews	_			Historic Preservation	
Applicant(s) from meeting ap Federal Rules.	oplicable State and	☐ Sł	noreland		☐ Variance	Variance		☐ Not in District or Landm	
2. Building permits do not include plumbing, septic or electrical work.		☐ Wetland		Miscella	Miscellaneous		Does Not Require Revie		
3. Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Flood Zon		Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work			Subdivision		☐ Interpretatio			Approved	
		☐ Si	te Plan		☐ Approv	ed		Approved w/	Condition
		Maj ☐ Minor☐ MM [☐ Denied			☐ Denied		
			Date:		Date:		Da	Date:	
I hereby certify that I am the owne I have been authorized by the own jurisdiction. In addition, if a permishall have the authority to enter all to such permit.	er to make this appli it for work described	med procation a	as his authorized application is iss	ne p d ag sued	ent and I agree t I, I certify that th	to conform t ne code offic	o all app cial's aut	plicable laws on thorized repres	of this entative
SIGNATURE OF APPLICAN			ADDRESS	<u> </u>		DATE	<u> </u>	рį	НО
· · · · · · · · · · · · · · · · · · ·									

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction:	Owner Name:	Owner Name:		Phone:		
450 Ray St	Jordan John R	Jordan John R				
Business Name:	Contractor Name:	Contractor Name:		Phone	Phone	
	Greg McCormack c/o Pines	Greg McCormack c/o Pines of Portla		207671263	2076712631	
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:	
			Single Family			

Dept: 09/09/2004 Zoning Status: Approved with Conditions Reviewer: Jeanine Bourke **Approval Date:** Ok to Issue: ✓ Note: 1) Approved with all conditions applied from permit # 04-0657 09/09/2004 Dept: Building **Status:** Approved with Conditions Reviewer: Jeanine Bourke **Approval Date:** Ok to Issue: ✓ Note: 1) Approved with all conditions applied from permit # 04-0657

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	PHO