

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 36 Liberty Way Lot 9		Owner: **** Pines of Portland		Phone: 772-2127	
Owner Address: ** 426 Forest Ave Portland Me 04101		Lessee/Buyer's Name:		Phone:	
Contractor Name: SAA		Address:		Phone:	
Past Use: vacant		Proposed Use: single family		COST OF WORK: \$ 135,000	
				PERMIT FEE: \$ 834.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group A7 Type: 52	
				Signature: <i>BOCA 99</i>	
Proposed Project Description: New single family with attached garage		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature: _____	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Date: _____	
Permit Taken By: K		Date Applied For: March 7 2000 K			

Permit No:
000241

PERMIT ISSUED

Permit Issued:

CITY OF PORTLAND

Zone: **R-3** CBL: 405A-D-004

Zoning Approval: *OK with conditions 3/15/00*

Special Zone or Review:

Shoreland *MA*

Wetland

Flood Zone *And 2 Zone X*

Subdivision

Site Plan maj minor mm **A**

2000026

Zoning Appeal

Variance

Miscellaneous

Conditional Use

Interpretation

Approved

Denied

Historic Preservation

Not in District or Landmark

Does Not Require Review

Requires Review

Action:

Appoved

Approved with Conditions

Denied

Date: _____

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT	ADDRESS:	DATE: March 7 2000	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

PERMIT ISSUED WITH REQUIREMENTS

CEO DISTRICT

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