City of Portland, Ma	ine - Building or Use	Permit Applicat	ion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04	101 Tel: (207) 874-8703	Fax: (207) 874-8	716	2014-00409		406 C010001
Location of Construction:	Owner		r Address:		Phone:	
205 MAINE AVE	CAPRIO JOH	CAPRIO JOHN R		MAINE AVE I )3	ME (207) 272-2465	
Business Name:	Contractor Name	Contractor Name:		actor Address:	Phone	
				E		
Lessee/Buyer's Name	Phone:			it Type:	Zone:	
				nolitions - Inter	R3	
Past Use: Single Family	Proposed Use:			Permit Fee: Cost of Work: \$30.00 \$1,0		CEO District: 5
Single Family	Same: Single i	Same: Single Family		ECTION:	3	
Proposed Project Description:  Removal of interior wall	between kitchen and living	room				
Removal of litterior wall	ioom.	PEDESTRIAN ACTIVITIES DISTRIC		TIES DISTRICT	CT (P.A.D.) roved w/Conditions Denied	
				ved Approv		
			Si	ignature:		Date:
Permit Taken By: Date Applied For: 03/03/2014			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 ☐ Wetland		☐ Varianc	ee	Not in District or Landmar
2. Building permits do septic or electrical w	Miscella			aneous	Does Not Require Review	
3. Building permits are within six (6) months	Flood Zone		Condition	onal Use	Requires Review	
False information mapermit and stop all w	☐ Subdivision ☐ Site Plan		Interpre	etation	Approved	
			Approv	ed	Approved w/Conditions	
	Maj Minor MM		_ Denied		Denied	
	Date:		Date:		Date:	
		CERTIFICA	TION	J		
I have been authorized by jurisdiction. In addition, i	the owner to make this appl f a permit for work describe	amed property, or the lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify that	e to conform to t the code offic	y the owner of record and that all applicable laws of this cial's authorized representative on of the code(s) applicable to
SIGNATURE OF APPLICANT	ADDRESS			DATE	PHONE	
RESPONSIBLE PERSON IN C	CHARGE OF WORK, TITLE				DATE	PHONE