City of Portland, Maine - Buil	ding or Use	Permit Applicat	ion   P	ermit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel: (2	207) 874-8703	6, Fax: (207) 874-8	716	2014-01708		406 H014001
Location of Construction: Owner Name:			Owner Address:			Phone:
250 BURNSIDE AVE BALL JULIA		256 FALMOUTH RD FALMOU' ME 04105		Н,		
Business Name: Contractor Name Francoeur Con		<b>:</b>	Contract	tor Address:	Phone:	
		nstruction P.O.		3ox 408 Westbrook ME 04098		(207) 807-0165
Lessee/Buyer's Name Phone:			Permit T	ype:	Zone:	
			Altera	tions - Single	Family	R3
Past Use: Proposed Use:			Permit 1	Permit Fee: Cost of Work		CEO District:
Single-Family Home (1 floor)- Vacant, due to fire damage.		Home	\$1,136.00 \$102,000.00 5 INSPECTION:			00.00 5
Proposed Project Description:						
Interior renovations to repair the hom	mage (1300 SF).					
	PEDESTRIAN		TRIAN ACTIVI	AN ACTIVITIES DISTRICT (P.A.D.)		
		Action: Approved Approved w/Conditions Denied				
			Sign	ature:		Date:
Permit Taken By:  dmc  Date Applied For:  08/01/2014			Zoning Approval			
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>		Special Zone or Ro	eviews	Zoni	ng Appeal	Historic Preservation
		Shoreland		☐ Varianc	e	Not in District or Landmar
		Wetland		Miscella	aneous	Does Not Require Review
		Flood Zone		Conditional Use		Requires Review
		Subdivision		☐ Interpretation ☐		Approved
	Site Plan		Approved		Approved w/Conditions	
	Maj Minor MM		Denied [		Denied	
		Date:		Date:		Date:
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit.	o make this appl or work describe	lication as his authored in the application	at the pr rized age is issued	ent and I agree I, I certify that	e to conform to t the code offici	all applicable laws of this al's authorized representative

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE