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

Location of Construction:	Owner:	Pł	hone:	Permit No:
22 Humboldt Street 04103 Greg Armitage			878-8048	- 0 A A 2 &
	see/Buyer's Name:	Phone: Bo	usinessName:	000028
SAA	N/A	878-8048		
Contractor Name: Address: Phone:			Permit Issued:	
**David Harradon 32 Mallison Street Gorham, ME 04038 893-1206			IAN 1 2	
Past Use: Proj	posed Use:	COST OF WORK:	PERMIT FEE:	- JAN 12
		\$ 11,000	\$ 90.00	
1-Family	Same	FIRE DEPT. □ Appr	oved INSPECTION: 18 18 18 18 18 18 18 18 18 18 18 18 18	
, and the second		☐ Denie	d Use Group: 93 Type	
			BOCA 46_ 1 08	Zone: CBL: 410-E-009
		Signature:	Signature:	
Proposed Project Description:		PEDESTRIAN ACTIV	VITIES DISTRICT (P.A.A).)	Zomna Approval:
Construct 8 x 16 Addition	Action: Approved UU Approved with Conditions:		Special Zone or Reviews:	
			☐ Shoreland	
		Denie	ed \square	
				Flood Zone
		Signature:	Date:	☐ Subdivision
Permit Taken By: ub	Date Applied For:	1-10-00		LI Site Plati maj Liminor Limin Li
				Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
2. Building permits do not include plumbing, septic or electrical work.				□ Miscellaneous
				☐ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				☐ Interpretation ☐ Approved
tion may invalidate a building permit and stop all work ****Call for Pick-Up David Harradon 893-1206				□ Denied
				Historic Preservation
PERMIT ISSUED WITH REQUIREMENTS				Not in District or Landmark
				Does Not Require Review
				☐ Requires Review
				Action:
		W\7	IH REQUIREMENTS	1.000
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				□Appoved
authorized by the owner to make this application as his	e e	* *	,	
if a permit for work described in the application is issue	d, I certify that the code official	's authorized representative sh	nall have the authority to enter all	Date:
areas covered by such permit at any reasonable hour to	enforce the provisions of the co	ode(s) applicable to such perm	nit	Date.
1-10-00				
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
DESCRIPTION OF DEPOSIT IN CHARLES OF WORLD THE P			- DEDMIX 10.5 2	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:			CEBEDISTRICALIED	
White-Permit	Desk Green-Assessor's C	anary-D.P.W. Pink-Public	File Ivory Card-Inspector	WITH REGUIRENCINS