City of Portland, M	laine - Buil	ding or Use l	Permit Applica	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 0	4101 Tel: (2	207) 874-8703	, Fax: (207) 874-8	3716	2014-00452		424 A005001
Location of Construction: Ov		Owner Name:		Owne	ner Address:		Phone:
41 TRUE ST		SNIPER TODD R		41 T	41 TRUE ST PORTLAND, ME 04103		4103 (207) 838-8656
Business Name: Lessee/Buyer's Name		Contractor Name:			actor Address:	Phone	
		True North Builders stacy@tnbmaine.com		279 Rocky Dundee Road Buxton ME 04093			ME (207) 215-5585
		Phone:		Permit Type:			Zone:
				Ado	Additions - Single Family		R5
Past Use:		Proposed Use:		Perm	mit Fee: Cost of Work:		CEO District:
Single family		Single Family		INSPI	\$870.00 ECTION :	\$85,0	00.00 5
Proposed Project Description			(24) 200				
Replace existing detach	arage (24' x 30')	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.			(D 4 D)		
attached by 13'8" x 21.5', 2 story addition Permit Taken By: Date Applied For:				Action: Approved Approved Signature:		•	
						ed Approv	ed w/Conditions Denied
			т				Date:
bjs	03/07	Zoning Approval					
This permit application does not preclude the			Special Zone or R	eviews	Zonin	g Appeal	Historic Preservation
Applicant(s) from r Federal Rules.				☐ Variance		Not in District or Landman	
 Building permits do not include plumbing, septic or electrical work. 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 			☐ Wetland		Miscellar	neous	Does Not Require Review
			☐ Flood Zone		Condition	nal Use	Requires Review
			Subdivision		Interpreta	ntion	Approved
			Site Plan		Approved	i	Approved w/Conditions
			Maj Minor MM		Denied		Denied
			Date:		Date:		Date:
I have been authorized b jurisdiction. In addition,	y the owner to if a permit fo	make this appl r work describe	ication as his authord in the application	nat the rized a is issu	proposed work is gent and I agree ed, I certify that	to conform to the code offici	y the owner of record and tha all applicable laws of this ial's authorized representative on of the code(s) applicable to
SIGNATURE OF APPLICANT			ADDRESS			DATE	PHONE
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE				DATE	PHONE