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

Location of Construction: 235 Sherwood ST	Owner: *Margaret P	. Beckler	Phone: 775–0235	Permit No:
Owner Address: SAA Ptld 04103	Lessee/Buyer's Name:	Phone:	BusinessName:	Permit No. 981325
Contractor Name:	Address:	Phon	e:	Peripersund ISSUED
Michael Farnham	99 Tripp Lake Camp R	d Poland	998-2961	THE STATE OF THE S
Past Use:	Proposed Use:	COST OF WOR	K: PERMIT FEE:	
		\$ 1700	\$ 30.00	NOV 2 3 1998
Single FAmily Dwelling	Same	FIRE DEPT. □	Approved INSPECTION:	
			Denied Use Group 3 Type	50 CITY OF PODTI AND
			WARTS VAPOR	CITY GE: PORTLAND
		Signature:	Signature:	420-J-004
Proposed Project Description:		PEDESTRIAN ACTIVITIES DISTRICT (2.A.D.)		Zoning Approval
		I	Approved ///	Special Zone or Reviews:
Install stainless steel chimney liner in existing			Approved with Conditions:	□
fire place chimney plus wood	stove installing pluce		Denied	□
chimney cap		G:		☐ Flood Zone
		Signature:	Date:	☐ Subdivision☐ Site Plan maj ☐minor ☐mm ☐
Permit Taken By: SP	Date Applied For:	vember 18, 1998		L'ORC Flan maj Liminoi Limin L
				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
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				☐ Conditional Use☐ Interpretation
tion may invalidate a building permit and stop all work				□ Approved
tion may invalidate a building perime and	stop un work			□ Denied
			J	
				Historic Preservation
WITH REQUIREMENTS				☑Not in District or Landmark ☐Does Not Require Review
				☐ Requires Review
			NEQUIREMED	
			TIMENTS	Action:
	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,				been ☐ Approved with Conditions
				,
if a permit for work described in the application				
areas covered by such permit at any reasonable				Date:
		· / 11	•	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
SIGNATURE OF AFFEICANT	ADDRESS.	DAIL.	HONE.	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:				CEO DISTRICT
White	Permit Desk Green-Assessor's Ca	nany_D PW - Dink Di	ublic File Ivony Card Inches	
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