## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 773-6164 6 Richmond STreet Mariorie Love 001110 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Phone: Address: Contractor Name: \*\*\* PO Box 6610 Portland Maine 04103 \*\*\* Sewall Associates COST OF WORK: SEP 2 9 34 PERMIT FEE: Past Use: Proposed Use: \$26,500 \$ 186.00 2 Family EXECUTED Family **FIRE DEPT.** □ Approved INSPECTION: NoTeca single family Use Group \$3-3Type 5 ☐ Denied CBL: 431-C-025 MOCA Signature: Signature: Zoning Approval: 0/ Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (M.A.D.) Action: Approved Special Zone or Reviews: Approved with Conditions: Shoreland renovate 2nd floor change of use to 2nd unite Denied □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: Sept 28 2000 K K **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use □ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work.. □ Denied PERMIT ISSUED WITH REQUIREMENTS **Historic Preservation** □ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ Denied 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, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit PERMIT ISSUED PE Sept 28 2000 DATE: PHONE: SIGNATURE OF APPLICANT ADDRESS:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE: