## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: \*\* Timothy Higgins Location of Construction: 242 Veranda Street Phone: Permit No: 04103 776-2268 3510 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Phone: Contractor Name: Address: Timothy Higgins . 4 **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: \$ 12,000 96.00 2-Unit **FIRE DEPT.** □ Approved Same INSPECTION: Use Group: 8-3 Type: 58 ☐ Denied BOC 496 Zone; CBL: 432-F-002 Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) Action: Approved Special Zone or Review Approved with Conditions: 3rd Floor addition for bedroom & bath. □ Shoreland Denied □ Wetland ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: KA 9-23-99 **Zoning Appeal** This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Call Timothy Higgins for P/U 776-2268 **Historic Preservation** Not in District or Landmark Does Not Require Review PERMIT ISSUED □ Requires Review WITH REOUIREMENTS 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

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT

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