## 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: 776-2268 Timothy Higgins \* 04101 242 Veranda Street × Owner Address: Lessee/Buyer's Name: Phone: BusinessName: N/A N/A N/A SAA Permit Issued: Phone: Contractor Name: Address: Not Given Not Given Timothy A. Higgins **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: \$ 1,000 \$ 30.00 DEC **FIRE DEPT.** □ Approved INSPECTION: Same 2-Family Use Group: 93 Type 52 ☐ Denied BOCA 90 432-F-002 Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P/A/D.) Action: Approved Amend Permit #991096. Extend 1' foot overhang front & rear. Approved with Conditions: ☐ Shoreland Can Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐ Permit Taken By: Date Applied For: 11-29-99 GD **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use ☐ Interpretation Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. □ Approved tion may invalidate a building permit and stop all work... □ Denied \*\*\* Please XXXXXXX: Call for Pick Up: 776-2268 Historic Preservation Not in District or Landmark □ Does Not Require Review ☐ Requires Review Action: **CERTIFICATION** ☐ Appoved 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 ☐ Approved with Conditions ☐ 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 11-29-99 ADDRESS: DATE: SIGNATURE OF APPLICANT PHONE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE **CEO DISTRICT**

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