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: William York 29 Oregon Street 207-773-7170 - Rear 991252 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: N/A N/A Same N/A Permit Issued: Contractor Name: Address: Phone: N/A N/A N/A COST OF WORK: PERMIT FEE: permit Past Use: Proposed Use: NOV 10 1999 \$ No Fee 1-Family Same **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: 4.3 Type 433-I-002 £, (Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Construction of new porch/deck. Approved with Conditions: Resubmission Shoreland Sabautter Denied ☐ Flood Zone Signature: Date: □ Subdivision Date Applied For: Permit Taken By: 10-29-99 KA □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □ Approved tion may invalidate a building permit and stop all work... □ Denied Send To: William York Historic Preservation Landmark District or Landmark 29 Oregon Street ☐ Does Not Require Review Portland, ME 04102 □ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS 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 11-1-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: WITH REQUIREMENTS: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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

CEO DISTRICT