City of Portland, Ma	nine - B	Building or Use 1	Permit Applicat	ion	P	Permit No:	Issue Date:		CBL:	
389 Congress Street, 04	Fax: (207) 874-8	716		2014-00457			437 A009001			
Location of Construction:		Owner Name:				r Address:			Phone:	
40 MAPLEWOOD ST			JOHNSON ROBERT H & MARJORIE S OR SURV			42 MAPLEWOOD ST PORTLAND, ME 04103				
Business Name:		Contractor Name	Contractor Name:			ctor Address:		Phone		
					ME					
Lessee/Buyer's Name		Phone:	Phone:			Туре:		Zone:		
D. A.T.		D 111	D J II			ge of Use Hor		R5 CEO District:		
Past Use: 3 Family Apartment Hou	se.	Proposed Use:	ly Apartment House	Perm	ait	Fee: Cost of Work: \$105.00		\$0.00 5		
3 ranniy 7 spartment 110u	30	Same. 3 Tamin	Same. 31 anniy 7 parament 116use		NSPECTION:			2		
					Use Group: R-2 Type: 5B					
						rtment House				
						Second Floor Apartment				
Proposed Project Description:	lina maatuu fan	Housing Code								
Home occupation in front, 2nd floor apartmen wholesale distrubution			baking pastry for		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
		Action: Approved Approved w/Conditions Denied								
		Signature:				Da	ite:			
Permit Taken By: bjs		te Applied For: 3/07/2014	Zoning Approvar							
This permit application does not preclude			Special Zone or Ro	eviews Zoning Appea		ng Appeal	Historic Preservation			
Applicant(s) from m Federal Rules.			Shoreland		☐ Variance	☐ Variance		Not in District or Landmar		
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscellaneous			Does Not Require Review		
3. Building permits are within six (6) month	s of the c	date of issuance.	☐ Flood Zone ☐ Subdivision		Conditional Use			Requires Review		
False information mapermit and stop all w		date a building			Interpretation			Approved		
			Site Plan			Approve	ed		Approved w/Conditions	
	Maj Minor MM]	Denied			Denied			
			Date:		Date:			Date:		
I hereby certify that I am I have been authorized by jurisdiction. In addition, shall have the authority to such permit.	the own f a perm	er to make this appl it for work describe	lication as his authored in the application	at the ized a	e pi age	ent and I agreed, I certify that	to conform to the code offici	all app al's aut	licable laws of this horized representative	
SIGNATURE OF APPLICAN	Γ		ADDR	RESS			DATE		PHONE	