City of Portland, Maine	- Building or Use	Permit Applica	tion Pe	rmit No:	Issue Date:	CBL:
389 Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-8	3716 2	013-02360		437 C003001
Location of Construction:	Owner Name:	Owner Name:		ddress:	Phone:	
6 SAMUEL RD	NAPOLITAN	NAPOLITANO ESTATES		UEL RD PO	(207) 899-5357	
Business Name: Contractor Name: James Murray		: Contract		or Address:		Phone
		453 Go		orham Rd Scarborough ME 04074		074 (207) 839-3213
Lessee/Buyer's Name	Phone:	Permit T		ype:		Zone:
			Alterations - Single Family		R3	
Past Use:	Proposed Use:	Proposed Use:		ee:	Cost of Work:	CEO District:
Single Family	Single Family		INSPECT	\$90.00	\$7,000.	.00 5
Proposed Project Description: Raising house by constructing	of foundation.	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved M/Conditions Denied				
					Date:	
Permit Taken By:Date Applied For:bjs10/21/2013			Zoning Approval			
1. This permit application do	pes not preclude the	Special Zone or R	eviews	Zonii	ng Appeal	Historic Preservation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance	e	Not in District or Landmark
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscella	nneous	Does Not Require Review
3. Building permits are void within six (6) months of the	Flood Zone		Conditio	onal Use	Requires Review	
False information may inv permit and stop all work	Subdivision		Interpre	tation	Approved	
		Site Plan  Maj Minor MM		Approved		Approved w/Conditions
				Denied		Denied
		Date:		Date:		Date:

## CERTIFICATION

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 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 areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
DESDONSIDI E DEDSON IN CUADCE OF WORK TITLE		DATE	DUONE