City of Portland, Maine	- Building or Use	Permit Applicat	tion	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101	0			2015-00091		438 C045001	
Location of Construction:	Owner Name:		Owne	r Address:		Phone:	
170 WOODLAWN AVE	HMH LLC	HMH LLC		MIDDLE RD F 05			
Business Name:			1				
Lessee/Buyer's Name Phone:		Permit Type:		Zone:			
				ditions - Single F	R5		
Past Use:	Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:		CEO District:	
Single-Family Home	Same: Single-	Family Home	nily Home		\$300.	00 5	
Proposed Project Description: After-The-Fact Permit - legaliz owner - repair of decks & any		PEDE	ESTRIAN ACTIVIT	TES DISTRICT (P.A	D .)		
				Action: Approved Approved w/Conditions Denied			
			Signature:		Date:		
Permit Taken By:Date Applied For:dmc01/16/2015			Zoning Approval				
1. This permit application do	es not preclude the	Special Zone or R	eviews	Zonir	ng Appeal	Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland			2	Not in District or Landmark	
 Building permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work 		Wetland		Miscella	neous	Does Not Require Review	
		Flood Zone		Conditio	onal Use	Requires Review	
		 Subdivision Site Plan 		Interpret	ation	Approved	
				Approve	d	Approved w/Conditions	
		Maj 🗌 Minor 🗌 MM 🗌		Denied		Denied	
		Date:		Date:	I	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
RESPONSIBLE DERSON IN CLUADCE OF WORK TITLE		DATE	DUONE