City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

						
Location of Construction: **20 Vesper Street Portland ** Owner: * Kenneth Billings *			Phone: 842	-2090	Permit No: 9 9 5	
Owner Address: SAA	Lessee/Buyer's Name:	Phone:	Busine	ssName:		
Contractor Name: Dawson Moulton	Address:	<u>I</u>	Phone: 797-6922		Permit Issued:	
Past Use:	Proposed Use:		COST OF WORK: PERMIT \$ 2,000 \$ 36.00		E:	
2 unit	same		PT. ☐ Approved ☐ Denied	INSPECTION: Use Group: A-3 Type 5%		
		Signature:	Li Demed	190C496 Signature: Hollar-	Zene: CBL: 003-K-004	
Proposed Project Description:		PEDESTR	PEDESTRIAN ACTIVITIES DISTRICT (1.4.D.)		Zoning Approval:	
Replacing old porch with pressure treated deck			Approved with Conditions:		Special Zone or Reviews: Shoreland Corp Wetland Flood Zone 9/30/99	
		Signature:		Date:	☐ Subdivision "	
Permit Taken By: K	Date Applied For:	Sept. 22 1999	К		Site Plan maj Chino Cmm C	
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 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. 					□ Variance □ Miscellaneous □ Conditional Use Zumits □ Interpretation OK Peq □ Approved 1955 Direct □ Denied Historic Preservation	
					t Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review	
				PERMIT ISSUED	Action:	
I hereby certify that I am the owner of record of authorized by the owner to make this applicati if a permit for work described in the applicatio areas covered by such permit at any reasonable	on as his authorized agent and I agree n is issued, I certify that the code offic	sed work is authorize to conform to all ap ial's authorized repr	ed by the owner of plicable laws of the esentative shall ha	his jurisdiction. In addition	, Denied	
		_	ot. 22 1999		_	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:		
RESPONSIBLE PERSON IN CHARGE OF W	ORK, TITLE			PHONE:	CEO DISTRICT	
White	-Permit Desk Green-Assessor's	Canary-D.P.W. P	ink-Public File	Ivory Card-Inspector		