Demolition of a Structure Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 180	Washington Ave	
Total Square Footage of Proposed Structur	Square Footage of Lot:	
834 5% ft	28	392 s6ft
Tax Assessor's Chart, Block & Lot:	Owner Name: Sunny Time Solar CL Address: Po Box 15372 Postland O4/12	Telephone:
11	Address: Po Box 15372 Postland	
Gliait# Diockii	E-Mail:	207-518-7038
10 F 11	brentadlere amail.com	
Lessee Name:	Applicant Name:	Cost Of Work: \$ 5000
(If different than owner)	(If different than owner)	Work: \$
in different than over-y		
Address:	Address:	
Address.		Fee: \$ 70.00
Phone:	Phone:	Fee: \$
E-Mail:	E-Mail:	
Current legal use: (i.e. garage, warehouse)	Single Family	
If vacant, what was the previous use?	NIA	
ii vacant, what was the previous use.	1	
How long has it been vacant?	A	
Position descriptions		
Project description:	e family and the construe	1. 6 2 2 2
Domplifion of existing sind	e family and the Construc	tion of a & Unit
mest Set backs and Futo	re boilding Permit.	
Contractor's name, address & telephone:	outfort St Portland ME	Allel
Brent Hales 67 MG.	ont fort St You Hand ME	- 07/81
Who should we contact when the permit i	s ready: Telephone: 207- Tand MF 04112	618-7-78
Mailing address: Sunny Time Sole	Telephone: 00/	3/0 /030
1 DO BOX 15372 POTH	land MF04112	
E Mail: 1 00 - 1 1 1 1 00 00 00 00	a'l com	
bren adiei e giv	nic files in pdf format are also required	
Electro	il die the Demolition call list Fail	ure to do so
Please submit all of the information of	outlined in the Demolition call list. Fail	are to as so
will result in the a	utomatic denial of your permit.	
and the state of the	ope of the project, the Planning and Development De	partment may request additional
	or information of to download copies of this form and	Other approach
tormation prior to the issuance of a permit. For raining	the Inspections Division office, room 315 City Hall or o	call 874-8703.
hereby certify that I am the Owner of record of the na	amed property, or that the owner of record authorizes	the proposed work and that I have bee
	an I contity that the Libe Official 3 dutiloffice of the	
ll areas covered by this permit at any reasonable hou	r to enforce the provisions of the codes applicable to t	ins perme
	1011	13
Signature of Applicant:	14/1, Date: 5/	10/06/4
orginature of Applicants / W	ay not commence ANY work until the peri	mit is issued.
This is not a permit; you m	ay not commence have work and the per	