

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

Location of Construction: <i>21-23 North St.</i>		Owner: <i>Ronald E. Burnham</i>		Phone:	Permit No:
Owner Address: <i>Box 7063, Gilford, NH 03247</i>		Lessee/Buyer's Name:		Business Name:	
Contractor Name: <i>Realtor John Hatcher</i>		Address:		Phone: <i>775-2121</i>	Permit Issued:
Past Use:	Proposed Use:	COST OF WORK: \$	PERMIT FEE: \$ <i>Appeal Fee \$50</i>	Zone: <i>R-6</i> CBL: <i>14-A-26</i>	
Proposed Project Description: <i>Misc. Appeal - functional div of property</i>		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
		Signature:		Signature:	
Permit Taken By: <i>V. Dover</i>		Date Applied For: <i>2-18-98</i>		Zoning Approval:	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Special Zone or Reviews:	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

**APPEAL SUSTAINED** *3/5/98*

**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 provisions of the code(s) applicable to such permit

*Ronald E Burnham*      *Box 7063 Gilford NH*      *Feb 18, 1998*  
 SIGNATURE OF APPLICANT      ADDRESS:      DATE:      PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE      PHONE:

White-Permit Desk   Green-Assessor's   Canary-D.P.W.   Pink-Public File   Ivory Card-Inspector

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: \_\_\_\_\_

**CEO DISTRICT**