

Location of Construction: 54 Turner St		Owner: Patricia Kinkade		Phone:		Permit No: 990216	
Owner Address: 16 Grove St Kennebunk ME		Lessee/Buyer's Name:		Phone:			<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED MAR 15 1999 </div>
Contractor Name: Crandall K. Toothaker		Address: 200 High St Ptld 04101		Phone: ***774-5358			
Past Use: 5 Unit-dwelling		Proposed Use: 4-Unit dwelling		COST OF WORK: \$ 150.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>[Signature]</i>			PERMIT FEE: \$ 30.00 INSPECTION: Use Group: R2 Type: 5B Signature: <i>[Signature]</i>
Proposed Project Description: Change of Use 5-unit to 4-unit with interior renovations				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		Zone: R-6 CBL: 014-F-004 Zoning Approval: <i>ok with conditions</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>3/5/99</i> <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"/>	
Permit Taken By: SP		Date Applied For: March 11, 1999				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

- 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..

Call for P/U

PERMIT ISSUED WITH REQUIREMENTS

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

March 11, 1999

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

CEO DISTRICT 1