•	*	Building or Use Per Tel: (207) 874-8703,			Per	rmit No: 06-1659	Issue Dat	e:	CBL: 014 N00	)4001
Location of	of Construction:	Owner Name: 131 MORNING		,		r Address: SOX 4271	1		Phone:	
		Contractor Nam Ron Copper	Contractor Name: Ron Copper		Contractor Address: 19 Vista Drive Windham				Phone 2078922555	
Lessee/Buyer's Name Phone:		Phone:	one:		Permit Type: Alterations - Multi Family				Zone:	
3 Unit Residential		replace cinder	3 Unit Residential - Rear of building replace cinder block foundation, enclose decks all three floors, add		Approved		00.00 INSPEC			
Rear of b	Project Description: uilding replace cinder ld dormer	r block foundation, encl	ose dec	ks all three	Actio	STRIAN ACTI	VITIES DIST		Condition	Denied
Permit Taken By: Date Applied For: 11/13/2006			Signature:  Zoning Approval				]	Date:		
App	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.		Special Zone or Reviews  Shoreland		ews	S Zoning Appeal  Variance			Historic Preservation  Not in District or Landn	
2. Buile			☐ Wetland			Miscellaneous			☐ Does Not Require Revie	
3. Building permits are void if work is not sta within six (6) months of the date of issuance			☐ Flood Zon			☐ Conditional Us			Requires Review	
	e information may inv nit and stop all work	validate a building	Subdivision		☐ Interpretatio			Approved		
			Si	te Plan		Approve	ed		Approved w	/Condition
			Maj Mino MM			☐ Denied			☐ Denied	
			Date:			Date:		Da	nte:	
I have bee	en authorized by the con. In addition, if a peat the authority to ente	wner of record of the na owner to make this appli ermit for work described or all areas covered by su	med pro cation a in the a	as his authorized application is iss	ne prop l agent sued, I	t and I agree t certify that th	o conform to ne code offic	o all app cial's aut	plicable laws of thorized repres	of this sentative
SIGNATU	RE OF APPLICAN			ADDRES:	S		DATE		P	НО

Location of Construction: 131 MORNING ST		Owner Name: 131 MORNING STREET LLC		Owner Address: PO BOX 4271		
Susiness Name:	Contractor Name:			Contractor Address:		
usiness ivame.	Ron Copper			19 Vista Drive Windham		
essee/Buyer's Name		Phone:		Permit Type:		
zessee/Buyer s Name	i none.		Alterations - Multi	Family	Zone	
Dept: Zoning Sta	atus: Approved with Con	ditions Reviewer	: Marge Schmuckal	Approval Dat	te: 11/14/200	
Note:					Ok to Issue:	
1) Separate permits shall be a	required for future decks,	sheds, pools, and/or	garages.			
2) This is NOT on approval f	on on additional devalling y	mit Von CHALL N	OT add any additional	Litahan aguinmant	including but not	
<ol><li>This is NOT an approval for limited to items such as sto</li></ol>					including, but not	
	•		-			
		a Anvichanas of nec		ite permit applicatioi	n for review and	
3) This property shall remain	a tiffee (3) failiffy dwelling	g. Any change of use	sman require a separa	1 11		
approval.	•					
	•				efore starting that	
<ul><li>approval.</li><li>4) This permit is being approwork.</li></ul>	•		iations shall require a			
<ul><li>approval.</li><li>4) This permit is being approwork.</li></ul>	oved on the basis of plans	submitted. Any dev	iations shall require a	separate approval b		
approval.  4) This permit is being approwork.  Dept: Building Sta	oved on the basis of plans and tus: Pending	submitted. Any dev  Reviewer	iations shall require a	separate approval b  Approval Date	te: Ok to Issue:	
approval.  4) This permit is being approwork.  Dept: Building Sta  Note:  Dept: Fire Sta	oved on the basis of plans	submitted. Any dev	iations shall require a	separate approval b	te: Ok to Issue:	
approval.  4) This permit is being approwork.  Dept: Building Stanote:  Dept: Fire Stanote:	oved on the basis of plans and tus: Pending	submitted. Any dev  Reviewer	iations shall require a	separate approval b  Approval Date	te: Ok to Issue:	
approval.  4) This permit is being approwork.  Dept: Building Stanote:  Dept: Fire Stanote:  1) Build according to plans	ntus: Pending  atus: Approved	submitted. Any dev  Reviewer	iations shall require a	separate approval b  Approval Date	te: Ok to Issue:	
approval.  4) This permit is being approwork.  Dept: Building Stanote:  Dept: Fire Stanote:  1) Build according to plans	ntus: Pending  atus: Approved	submitted. Any dev  Reviewer	iations shall require a	separate approval b  Approval Date	te: Ok to Issue:	
approval.  4) This permit is being approwork.  Dept: Building Standard Note:  Dept: Fire Standard Note:  1) Build according to plans 2) Maintain all means of egreen	ntus: Pending  atus: Approved	submitted. Any dev  Reviewer	iations shall require a	separate approval b  Approval Date	te: Ok to Issue:	
approval.  4) This permit is being approwork.  Dept: Building Stanote:  Dept: Fire Stanote:  1) Build according to plans	atus: Pending  atus: Approved	submitted. Any dev  Reviewer	iations shall require a	separate approval b  Approval Date	te: Ok to Issue:	

## **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 APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО