•	land, Maine - Buil Street, 04101 Tel:	0			Per	rmit No: 07-0418	Issue Dat	e:	CBL: 015 A00)2078
Location of Construction: 320 Eastern Promenade		Owner Name:			Owner Address: 340 Eastern Promenade # 254			Phone: 498-4588		
Business Name:		Contractor Nan	Contractor Name:		Contractor Address:			Phone		
Lessee/Buyer's Name		Phone:	Phone:		Permit Type: Amendment to Commercial			Zone:		
Past Use: 80 Residential Condominiums		permit #06-099	Proposed Use: 80 Residential Condos to amer permit #06-0997 to replace all windows and doors				Cost of Wo \$48,00 Approved Denied			Туре
Proposed Proje Amend permit	ct Description: # 06-0997 to replace a	ll windows and d	oors		Signat PEDES Actio	STRIAN ACTI	VITIES DIST	,	.A.D.)	Denied
					Signar	_	veu <u>П</u> Арг		Date:	Demed
Permit Taken By: Date Applied For: pmb 04/23/2007				Zoning Approval						
Applicant	. This permit application does not preclude the Applicant(s) from meeting applicable State an Federal Rules.		Special Zone or Reviews Shoreland		Zoning Appeal Variance			Historic Preservation Not in District or Landm		
	Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous		I	☐ Does Not Require Revie		
3. Building permits are void if work is not start within six (6) months of the date of issuance			☐ Flood Zon			Conditional Us		ı	Requires Review	
	e a building			☐ Interpretatio		l	Approved			
			☐ Si	Site Plan		Approved			Approved w/Condition	
			Maj Mino MM			Denied			☐ Denied	
			Date:			Date:		Da	ite:	
I have been aut jurisdiction. In	that I am the owner or the owner of the owner of the owner addition, if a permit for the owner all a	to make this appl or work described	med proication and in the a	as his authorized application is is:	ne prop d agent sued, I	t and I agree t certify that th	to conform to the code office	o all app cial's aut	plicable laws of horized repres	of this sentative
SIGNATURE O	F APPLICAN			ADDRES	S		DATE	;	Pl	НО

	Owner Name:	Owner Address:	Phone:	Phone: 498-4588	
320 Eastern Promenade	Zafrison James P	340 Eastern Promena	de # 254 498-458		
Business Name: Contractor Name:		Contractor Address:	Phone	Phone	
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Com	mercial	Zone:	
Dept: Zoning Note: In kind replacem	Status: Not Applicable nent, no new openings	Reviewer: Jeanine Bourke	Approval Date: Ok to Is	sue: 🗸	
Tiote. In kind replaced.	1 0				

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	PHO
DECDONGINI E DEDGON IN CHARCE OF WORK TIT		DATE	DIIO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO