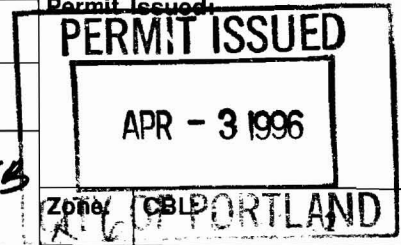


City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:		Owner:		Phone:	Permit No:
Owner Address:		Leasee/Buyer's Name:		Phone:	960230
Contractor Name:		Address:		Phone:	
Past Use:		Proposed Use:		COST OF WORK: \$	PERMIT FEE: \$
Proposed Project Description:		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: 92 Type: 5B	
		Signature: [Signature]		Signature: [Signature]	
Proposed Project Description:		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Appeal:	
Permit Taken By:		Date Applied For: 299		<input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	



1. This permit application doesn't 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..

- Special Zone or Reviews:**
- Shoreland
 - Wetland
 - Flood Zone
 - Subdivision
 - Site Plan maj minor mm

- Zoning Appeal**
- Variance
 - Miscellaneous
 - Conditional Use
 - Interpretation
 - Approved
 - Denied

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

- Action:**
- Approved
 - Approved with Conditions
 - Denied

Date: _____

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 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

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

CEO DISTRICT

City of Portland, Maine
Memorandum

To: Marge Schmuckal, Zoning Administrator
From: Mary P. Davis, Loan Officer *Mary Davis*
Subject: **Verification of Legal Number of Units**
Date: *4/29/99*
C-B-L- Number: *22-L-12*

We have received an application for housing assistance for the property located at:

16-18 Anderson

The applicant's name is: *Carrie Doyle*

In completing the application the applicant has indicated that the number of units currently in use at this property is *3*.

Please verify that the number of units are legal under the current code.

- Yes, the number of units are legal. *per microfiche*
- No, the number of units do not coincide with City records or the Land Use Code. According to City records the legal number of units for this property is _____.
- The property is a single family dwelling.

Verified By: *Marge Schmuckal* Title: *Zoning Admin*
6/15/99

[Handwritten initials]
022-L-012

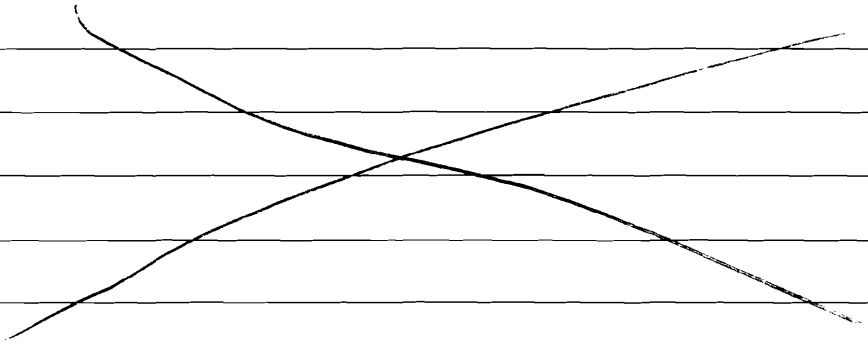
COMMENTS

2-9-97 Suspected fire damage to Apt. OK
Apt corrected OK

4-18-97 wrote up rad's under housing extension

7/2/97 Sat CoC on all rad's corrected
M. Wig #1

3. WA unit side
Ext. pipes EW 1/4



90-0230

022-L-012

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____