

Location of Construction: 04101	Owner: Linda Carberg
Owner Address: 34 Franklin St. #4102	Lessee/Buyer's Name: Linda Carberg
Contractor Name: Scott Karmy David Laird	Address: 275 Congress St. #4101
Contractor Phone: (207) 874-4802	Phone: (207) 874-4802

Proposed Use: Same	COST OF WORK: \$ 3,000.00	PERMIT FEE: \$ 42.00
FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	Zone: CBL: 023-A-115

Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	Signature: [Signature]	Date: April 21, 2008
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	Signature: [Signature]	Zone: [Zone]

Permit Taken By: [Name]	Date Applied For: [Date]
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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.

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.

PERMIT ISSUED WITH REQUIREMENT

SIGNATURE OF APPLICANT: _____	ADDRESS: _____	DATE: _____	PHONE: _____
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: _____	PHONE: _____	DATE: _____	PHONE: _____

4/6/05
Closed

Allow

Inspection Record

Type

Date

Foundation: _____

Framing: _____

Plumbing: _____

Final: _____

Other: _____