

Location of Construction: Stone St.		Owner: Bayside Housing Associates LP	Phone: 772-3225	Permit No: 001315
Owner Address: Berman Associates, 1 India St. Portland, ME 04101		Lessee/Buyer's Name: Portland, ME 04101	Phone:	BusinessName:
Contractor Name: Benchmark		Address: 650 Main St., So. Portland	Phone: 874-2963	Permit Issued: NOV 16 2000
Past Use: Vacant	Proposed Use: Multi Family	COST OF WORK: \$1,300,000.00	PERMIT FEE: \$WAIVERED per Mark A.	Zoning Approval: Zone: R-7 CBL: 032-E-017 Signature: <i>[Signature]</i>
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	
Proposed Project Description: 33 Unit Multi Family Housing — <i>23 built for assessing</i> <i>23 Units - 6 Stone St 26 Foot</i> <i>10 Units - 255 Cumberland Ave 26-H-006</i>		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		Special Zone or Reviews: <input type="checkbox"/> Shoreland N/A <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone Panel B <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> #2090095 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
Permit Taken By: Gayle	Date Applied For: October 6, 2000 GG	Signature: _____ Date: _____		

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

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: **October 6, 2000** PHONE: _____
 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

PERMIT ISSUED
 WITH REQUIREMENTS
 CEO DISTRICT 1