

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

Location of Construction: Six Houlton St		Owner: Kirk Goodhue		Phone:		Permit No: 960943	
Owner Address: Six Houlton St- Ptd ME		Lease/Buyer's Name: 04102		Phone:		Business Name:	
Contractor Name: Sewall Assoc, Inc		Address: Box 6610 - Ptd ME 04101		Phone: 774-4755		Permit Issued: SEP 26 1996	
Past Use: 2-fam dwlg		Proposed Use: 2-fam w intr rvtns		COST OF WORK: \$ 2100		PERMIT FEE: \$ 30	
Proposed Project Description: interior renovations		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type: Signature: <i>[Signature]</i> 9/25/96		Zone: CBL: 55-B-32 Zoning Approval: <i>[Signature]</i>	
Permit Taken By: L Chase		Date Applied For: 9/20/96		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.): Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Other	

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- 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 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: *[Signature]* ADDRESS: _____ DATE: *9/20/96* 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

PERMIT ISSUED
 SEP 26 1996
CITY OF PORTLAND

Zone: CBL: **55-B-32**
 Zoning Approval: *[Signature]*

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: *9/20/96*

D. Andrew B

CEO DISTRICT 3