	y of Portland, Mai Congress Street, 041		_			ŀ	06-0052	Issue Dat	e:	057 D0	23001	
Location of Construction: Owner Name:					1 (201) 01 1 0110		ner Address:				Phone:	
	GRAY ST		KAHN SUZANNE E & JOHN EDER			101 GRAY ST						
Business Name:			Contractor Name: Residential Services/ Martin Barry			Contractor Address: 1155 Sawyer Road Cape Elizabeth				Phone	Phone	
Lessee/Buyer's Name			Phone:				Permit Type: HVAC			Zone:		
Past Use: Proposed Use:						Permit Fee:		Cost of Work: CI		CEO District:		
Sin	gle Family Home		Single Family	Home/ install a					\$0.00	2		
						FIRE DEPT:		Approved Denied	Use G			
Pro	posed Project Descriptio	n·				_						
110,	poseu i rojeci Descriptio	п.				Signature:			Signati	ure:	:	
							DESTRIAN ACT	IVITIES DIS				
						Acı	tion Appro	oved Ap	proved v	v/Condition	Denied	
						Sig	nature:			Date:		
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval						
ld	obson	01/11	/2006		2011119				7 ipprovid			
This permit application does no			•	Special Zone or Revie Shoreland			ws Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting applicable Sta Federal Rules.						☐ Variance			Not in District or Landn		
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland			Miscel	Miscellaneou		☐ Does Not Require Revie		
3. Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flood Zon			Conditional Us			Requires Review			
False information may invalidate a building permit and stop all work				Subdivision			☐ Interpretati			Approved		
			Site Plan			Approved			Approved w/Condition			
				Ma Mino M			☐ Denied			☐ Denied		
				Date:			Date:			Date:		
I ha juris shal	reby certify that I am the ve been authorized by to sdiction. In addition, if Il have the authority to such permit.	he owner to a permit fo	o make this appli r work described	med pr cation I in the	as his authorized application is is:	ne pr d age	ent and I agree , I certify that t	to conform he code offi	to all ap	oplicable laws athorized repre	of this sentative	
SIGNATURE OF APPLICAN				ADDRESS			DATE		РНО			

Location of Construction: 101 GRAY ST	Owner Name: KAHN SUZANNE I	E & IOHN EDER	Owner Address: 101 GRAY ST	Phone:	Phone: Phone	
Business Name:	Contractor Name: Residential Services		Contractor Address: 1155 Sawyer Road Cape Elizabeth			
Lessee/Buyer's Name	Phone:		Permit Type: HVAC		Zone:	
Dept: Zoning Status Note:	: Pending	Reviewe	·: Approv	val Date: Ok to Issu	ıe: 🗆	
Dept: Building Status Note:	: Pending	Reviewer	:: Approv	val Date: Ok to Issu	Date: Ok to Issue:	
I have been authorized by the owne jurisdiction. In addition, if a permi	er to make this application t for work described in the	on as his authorize ne application is is	the proposed work is authorized by to dagent and I agree to conform to all sued, I certify that the code official's anable hour to enforce the provision	applicable laws authorized repre	of this esentative	
SIGNATURE OF APPLICAN		ADDRES	S DATE	I	РНО	