## 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: 882-6509 11 Summer Street \*\*Peter Green 000278 Owner Address: PO Box 235 Lessee/Buyer's Name: Phone: BusinessName: N/A N/A \*\*Wiscasset, ME 04578 N/A Permit Issued: Contractor Name: Address: Phone: Owner SAA SAA COST OF WORK: PERMIT FEE: Past Use: Proposed Use: APR - 5\$ 5,000 \$ 54.00 **FIRE DEPT.** □ Approved INSPECTION: 1-Family Same Use Group \$3 Type: 5/3 ☐ Denied CBL: BOCA 99 058-B-022 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved Special Zone or Reviews: Interior renovations. Approved with Conditions: □ Shoreland Denied □ Wetland ☐ Flood Zone No. ☐ Subdivision **Z** Signature: Date: ☐ Site Plan ma Permit Taken By: Date Applied For: Æ GÞ 3-31-00 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied **Historic Preservation** □ Not in District or Landmark ☐ Does Not Require Review PERMIT ISSUED WITH REQUIREMENTS. ☐ Requires Review Action: **CERTIFICATION** □ Appoved 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 ☐ Approved with Conditions □ Denied 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 Date: 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: PHONE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector