

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

Location of Construction: 11 Summer Street 04102		Owner: Peter Green		Phone: 882-6509		Permit No: <b>991139</b>	
Owner Address: **P.O. Box 235, Wiscasset, ME 04578		Lessee/Buyer's Name: N/A		Phone: SAA		Business Name: N/A	
Contractor Name: Owner		Address: SAA		Phone: SAA		Permit Issued: <b>OCT 18 1999</b>	
Past Use: 1-Family		Proposed Use: Same		COST OF WORK: \$ 6,000		PERMIT FEE: \$ 60.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <i>A-3</i> Type: <i>513</i> <i>BOCA 96</i>	
Proposed Project Description: Add dormer to house.				Signature:		Signature: <i>[Signature]</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: <i>R-1</i> CBL: 058-B-022	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>To remain OK S - Hamley</i>	
Permit Taken By: KA		Date Applied For: 10-4-99		Signature:		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 maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> <i>18/15/99</i> <i>2nd floor increase &lt; 50% of</i> <b>Zoning Appeal</b> <i>at foot</i>	

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..

\*\*\*Send To: Peter Green  
~~11 Summer Street~~ P.O. Box 235  
~~Portland, ME 04102~~ Wiscasset, ME  
 04578

**PERMIT ISSUED  
WITH REQUIREMENTS**

**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

10-4-99

SIGNATURE OF APPLICANT ADDRESS: DATE: 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

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Approved  
 Approved with Conditions  
 Denied

Date: *[Signature]*

CEO DISTRICT  
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