

Location of Construction: 33 Carroll Street Portland		Owner: Bruce McGorill		Phone: 772-3228		Permit No: 991110
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		
Contractor Name: ** Sunrise Bldrs Inc. (Jos)		Address: P.O. Box 8096 Portland Maine 04104		Phone: 799-4477		Zone: R-A CBL: 062-A-013
Past Use: single family		Proposed Use: same		COST OF WORK: \$ 30,000		
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B3 Type: 5B DOC 796 Signature: <i>Hoffner</i>
Proposed Project Description: Re build garage (existing)				Signature:		
Permit Taken By: K.		Date Applied For: Aug. 25 1999 K				Zoning Approval: <i>OK with the</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>Prior</i> <input type="checkbox"/> Wetland <i>Foot Print</i> <input type="checkbox"/> Flood Zone <i>No exceptions</i> <input type="checkbox"/> Subdivision <i>9/3/99</i> <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>

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..

**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

SIGNATURE OF APPLICANT	ADDRESS:	DATE: Aug. 25 1999	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action: *10/6/99 H.P. w/req.*
 Approved as amended at
 Approved with Conditions
 Denied

Date: *TO DCA*
10/6/99 ~~8/25/99~~ **9/3/99**

CEO DISTRICT 3