## 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: 772-4540 Potts, Andy 111 West St Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 04102 SAA DEPT. OF BUILDING INSPECTION Permity Spripe RTLAND, ME Contractor Name: Les Wilson & Sons Address: Phone: Westbrook, ME 04098 P.O. Box 1028 **COST OF WORK:** Past Use: Proposed Use: PERMIT FEE: 0 1999 \$ 10.00 FIRE DEPT. Approved INSPECTION: 1-fam Same ☐ Denied Use Group: Type: BOC AGC 063-A-012 Signature: 4440 Proposed Project Description: Zoning Approvel PEDESTRIAN ACTIVITIES DISTRICT ( Action: Approved Approved with Conditions: ☐ Shoreland Remove Tank (Underground) Denied ☐ Wetland ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: SP 09 February 1999 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. □ Conditional Use 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 ☐ Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ 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 09 February 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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