	·:	207/ 07 1 0710	0						
	CHARY S	C		Owner Address:		Phone:			
		& ALLISON R	14 LEONARD ST						
Business Name: Contractor N			Contractor Address:			Phone			
Property Ov	vner	ier						1	
Lessee/Buyer's Name Phone:	Phone:		Permit Type: Sheds					Zone:	
Past Use: Proposed Use:				it Fee:	Cost of Wo	Cost of Work: CEO D			
single family home single family h		ome - install a 8' x 10'		\$30.00	\$5	00.00			
				DEPT:	Approved	INSPECTION:		T.	
					Denied	Use Grou	ıp:	Type	
Proposed Project Description:									
install a 8' x 10' shed			Signature:		Signature	Signature:			
				PEDESTRIAN ACTIVITIES DISTRIC			CT (P.A.D.)		
			Action	n Appro	ved App	oroved w/C	Condition	Denied	
			Signat	neo.		т	Date:		
Permit Taken By: Date Applied For:			Signature: Zoning Approval				Jaie.		
Ldobson 10/26/2009			Zomig	Approva	1				
This permit application does not preclude the	Spec	Special Zone or Revi		iews Zoning Appeal			Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.	l Si	Shoreland		☐ Variance			☐ Not in District or Landn		
2. Building permits do not include plumbing, septic or electrical work.		☐ Wetland		Miscellaneous			☐ Does Not Require Revie		
3. Building permits are void if work is not started within six (6) months of the date of issuance.	☐ Fl	Flood Zon		Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work	☐ Su	Subdivision		☐ Interpretatio			Approved		
		Site Plan		Approved		Approved w/Condition			
	Maj	Maj 🔲 Mino 🔲 MM		Denied		☐ Denied			
	Date:	Date:		Date:		Date	Date:		
I hereby certify that I am the owner of record of the I have been authorized by the owner to make this apprication. In addition, if a permit for work describable have the authority to enter all areas covered by to such permit.	named proplication a	as his authorized application is iss	ne prop l agent sued, I	and I agree t certify that th	to conform to	to all apple	licable laws of orized repres	of this sentative	
SIGNATURE OF APPLICAN		ADDRESS	2		DATE	·	ות	но	
SIGNATURE OF APPLICAN		ADDKESS	•		DATE	2	P	пО	

Location of Construction:	Owner Name:		Owner Address:		Phone:		
14 LEONARD ST	POOLE ZACHAR	POOLE ZACHARY S & ALLISON R		14 LEONARD ST			
Business Name:	Contractor Name:		Contractor Address:	Phone			
	Property Owner						
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:	
			Sheds				
	G					12 < 12 0 0 0	
Dept: Zoning	Status: Approved with Con	ditions Reviewer:	Marge Schmuckal	Approval Dat		/26/2009	
Note:					Ok to Issu	e: 🗸	
1) Separate permits shall	be required for future decks, s	sheds, pools, and/or g	arages.				
	val for an additional dwelling us stoves, microwaves, refriger				including, b	out not	
	nain a single family dwelling.		-		or review a	nd	
	pproved on the basis of plans	submitted. Any devia	ations shall require a sep	parate approval b	efore starti	ng that	
Dept: Building	Status: Pending	Reviewer:	Tom Markley	Approval Dat	te:		
Note:					Ok to Issu	e: 🗆	
		CERTIFICATIO	N				
I have been authorized by t jurisdiction. In addition, if	he owner of record of the name he owner to make this applica a permit for work described in enter all areas covered by such	tion as his authorized the application is iss	agent and I agree to con ued, I certify that the coo	nform to all applide official's autho	cable laws orized repre	of this sentative	

ADDRESS

SIGNATURE OF APPLICAN

DATE

PHO