

Location of Construction: 17 Fredric Street		Owner: Mary Anne LeClair		Phone: 878-6735		Permit No: 000831	
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: **Jeff Bailey 878-6735****		Address:		Phone:		Permit Issued:	
Past Use: Multi family		Proposed Use: same		COST OF WORK: \$2,500		PERMIT FEE: \$ 42.00	
Proposed Project Description: <i>legal 3 family only Allowed per with daycare for 6 as A home occupation microfiche</i> Demo of garage add shed 10x12 in place		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: 4 Type: 5B Signature: <i>[Signature]</i>			
		Signature:		Signature: <i>[Signature]</i>			
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action:		Date:			
Approved <input type="checkbox"/>		Approved with Conditions: <input type="checkbox"/>		Denied <input type="checkbox"/>			
Signature:		Date:		Zoning Approval: <i>OK with conditions</i>			
Permit Taken By: K		Date Applied For: July 24 2000 K		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"/>			

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

July 25 2000

SIGNATURE OF APPLICANT ADDRESS: DATE: 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:**
- Approved
 - Approved with Conditions
 - Denied

Date: *[Signature]*

PERMIT ISSUED WITH REQUIREMENTS
CEO DISTRICTS

3