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: 140 William St Bissonnette, Susan 773-5626 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA 04103 Contractor Name: Address: Phone: FEB 2 2 1999 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: 25.00 2-family dwelling Same w/home occ **FIRE DEPT.** □ Approved INSPECTION: Use Group: \$7 Type: 5 13 ☐ Denied 1st floor Zenen CBL: BOC#96_1 081-B-011Signature: Proposed Project Description: Change Use ng Approval: AVAPEDESTRIAN ACTIVITIES DISTRICT (NA.D.) Home use occupation of Susan Bissonette and Pam Smith Action: Approved d/b/a "Mortgages by Design" Approved with Conditions: ☐ Shoreland Denied □Wetland □ Flood Zone C □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 17 Feb 99 **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 mail permit to : David A. Lowing Ave 189 Spenwing Ave CAPE ELIZ, ME 04107 Mistoric Preservation **™**ot 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 18 Feb 99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CEO DISTRICT

PHONE:

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