

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 8

Location of Construction: 32 Woodmont Street		Owner: **Stuart A. Brown		Phone: 856-6381 207-775-1686	
Owner Address: **150 Spring Street #16 04101		Lessee/Buyer's Name:		Phone:	
Contractor Name: Poole & Sons Constructions/Brown		Address:		Phone:	
Past Use: 1-Family		Proposed Use: Same		COST OF WORK: \$ 42,000	
				PERMIT FEE: \$ 276.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: A3 Type: 5B 200996	
Proposed Project Description: Interior renovations 2nd and 3rd Floor - New Dormers		Signature:		Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Date:	
Permit Taken By: UB		Date Applied For: 9-3-99			
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied			

Permit No:
990978

PERMIT ISSUED
SEP 10 1999

CITY OF PORTLAND
001-5-017

Zoning Approval:
OK with conditions
Special Zone or Re-zones:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm
9/9/99

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

Please Send To: **Stuart A. Brown**
150 Spring St. #16
Portland, ME 04101

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: 9-3-99	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:
White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public Files Ivory Card-Inspector			

Action:
 Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

CEO DISTRICT
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