

Location of Construction: 23 Beacon Street		Owner: *** B. Morgan Delattre		Phone: 773-2610		Permit No: 1588
Owner Address: ***23 Beacon Street 04101		Lessee/Buyer's Name:		Phone:		
Contractor Name:		Address:		Phone:		Permit Issued:  DEC 8 2000
Past Use:  Duplex		Proposed Use:  Duplex		COST OF WORK: \$		
Proposed Project Description:  Change of use as personal training studio / <i>2 unit legal use</i>		Signature: <i>no change of use in # of D.U. Allowed</i>		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <i>A</i> Type: <i>512</i>
				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action:		Approved <input type="checkbox"/>		Zoning Approval: <i>ok with conditions</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>12/7/00</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
		Approved with Conditions: <input type="checkbox"/>		Denied <input type="checkbox"/>		
Signature:		Date:				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied
Permit Taken By: Gayle		Date Applied For: December 6, 2000 GG				

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..

**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

December 6, 2000

SIGNATURE OF APPLICANT \_\_\_\_\_ ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

**PERMIT ISSUED WITH REQUIREMENTS**

**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 DISTRICT

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