	y of Portland, Main Congress Street, 0410		0			P	08-0409	Issue Dat	e:	083C C0	01001
	ation of Construction:		Owner Name:			Own	er Address:	<u> </u>		Phone:	
0 Nancy Ln Savastano Ar			thony &		298	3 Holiday Cou	rt		207-776-2	839	
			Contractor Name: D & H General Contractors / Dean M		Contractor Address: 72 Thyngs Mill Road Shapliegh			gh	Phone 2075760467		
Lessee/Buyer's Name Phone:			Phone:			mit Type: oundation Only/Residential			Zone:		
Past	Use:		Proposed Use:			Permit Fee:		Cost of Wo	Cost of Work: CE		
-			single family -						\$0.00	1	
	four		foundation only		FIRE	E DEPT:	Approved Denied	Use Gr	CTION: roup:	Type	
Prop	posed Project Description	1:									
add	128' x 21' foundation onl	y			Signature:			Signature:			
						PEDESTRIAN ACTIVITIES DISTRI			FRICT (ICT (P.A.D.)	
						Acti	on Appro	ved App	proved w	/Condition	Denied
						Sign	ature:			Date:	
Peri tm	nit Taken By: m		pplied For: 5/2008			Zoning Approval					
1.	This permit application	n does not	preclude the	Spec	ial Zone or Revi	ews	Zoning Appeal			Historic Preservation	
	Applicant(s) from mee Federal Rules.		•	☐ Shoreland		Variance			Not in District or Landm		
2.	Building permits do no septic or electrical work		lumbing,	Wetland		Miscella	Miscellaneous		☐ Does Not Require Revie		
3.	Building permits are vowithin six (6) months of	of the date	of issuance.	Flood Zon		Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work				Subdivision		☐ Interpretatio			Approved		
				Site Plan			Approved		Approved w/Condition		/Condition
				Maj [Mino MM		☐ Denied			Denied	
				Date:			Date:		D	ate:	
I ha juris shal	reby certify that I am the ve been authorized by the diction. In addition, if a I have the authority to e	ne owner to a permit fo	o make this appli r work described	med procession a	as his authorized application is iss	e pro l ager ued,	nt and I agree to I certify that the	to conform to ne code office	to all ap cial's au	plicable laws of thorized representations.	of this sentative
to St	uch permit.										
SIG	NATURE OF APPLICAN				ADDRESS	S		DATE	E	P	НО

Location of Construction: 0 Nancy Ln	Owner Name: Savastano Anthony &	ζ	Owner Address: 2983 Holiday Court	Phone: 207-776-2839	
Business Name:	Contractor Name: D & H General Contra	ctors / Dean M	Contractor Address: 72 Thyngs Mill Road Shapliegh	Phone 2075760467	
Lessee/Buyer's Name	Phone:		Foundation Only/Residential		Zone:

Dept:	Zoning	Status:	Approved with Conditions	Reviewer:	Tammy Munson	Approval Date	: 04/25/	/2008
Note:						C	Ok to Issue:	✓

1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

Dept:	Building	Status:	Approved with Conditions	Reviewer:	Tammy Munson	Approval Date:	04/25/2008
Note:						Ok	to Issue: 🔽

- 1) As discussed, all required information regarding the roof framing details, deck construction details, and lally column spacing must be submitted to this office prior to the issuance of permit # 08-0267.
- 2) This is a foundation only permit. No other construction activity is authorized.

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 provision of the code(s) applicable to such permit.

DEGRONGINI E DEDGON IN CHARCE OF WORK THE		DATE	DIIO
SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО