

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: Diamond Cove Unit 1A		Owner: John O'Leary		Phone: 802-658-0619		Permit No: 581453	
Owner Address: *** 179 Maple St. #2 Burlington, VT 05401		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name:		Address:		Phone:		Permit Issued: DEC 30 1998	
Past Use: Vacant/Empty 50+years		Proposed Use: Residential/Condo		COST OF WORK: \$ 80,000		PERMIT FEE: \$ 420.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: R-3 Type: 3A BOCA 96 Signature: <i>Hoffen</i>	
Proposed Project Description: All cosmetic no structural. Restore & remodel including <u>kitchens</u> & <u>baths</u> . <u>UNIT A</u>				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Zone: IR-1 CBL: 83-E B-011 Zoning Approval: OK S.H. <i>To remain (R-3) Condo,</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>over 75' from H/W</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>zone C</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: MG		Date Applied For: 12/21/98				Signature: _____ Date: _____ Zoning Appeal <input type="checkbox"/> Variance <i>12/29/98</i> <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

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

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

CEO DISTRICT

1
AR/DC

12/29/98

Date: *To Deba 12/29/98*

Action:

- Approved
- Approved with Conditions
- Denied

- Not in District or Landmark
- Does Not Require Review
- Requires Review, *see attached.*

ok with conditions
Zoning Appeal

Zone: **IR-1** CBL: 83-E B-011

CITY OF PORTLAND