Location of Construction: Owner: Phone: Permit No: NEW ISLAND AVE ΡΤ DENNIS CORBURN 766-5620 001334 Lessee/Buyer's Name: BusinessName: Owner Address: 4611 CHATTAHOOCHEC MARIETTA GA Phone: Permit Issued: Contractor Name: Address: Phone: *** BEN 776-4635**** Proposed Use: **COST OF WORK: PERMIT FEE:** Past Use: \$ XXXX 25,000 \$174.00 FIRE DEPT. Approved **INSPECTION:** SAME SINGLE FAMILY Use Group: 9.3Type 5/2 □ Denied BOCA99 CBL: 084-D-008 Zone: Signature: Signature: Zoning Proposed Project Description: Approx PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Approved Action: pecial Zone or Reviews Approved with Conditions: □ Shoreland *N* SUNROOM UNDER DECK Denied □ Wetland □ Flood Zone Signature: □ Subdivision Date: □ Site Plan mai □minor □mm □ Permit Taken By: Date Applied For: NOV 16 2000 Κ Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. □ Conditional Use 3. 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 **Historic Preservation** And the District or Landmark PERMIT ISSUED WITH REQUIREMENTS Does Not Require Review □ Requires Review Action: CERTIFICATION □Appoved □ Approved with <u>Con</u>ditions 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit NOV 17 2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: 3 **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: WCEO'DISTRICT

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

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