



<b>Location of Construction:</b> 40 Epps St	<b>Owner Name:</b> Kamp Dean A	<b>Owner Address:</b> 71 Central Ave	<b>Phone:</b> 653-7042
<b>Business Name:</b>	<b>Contractor Name:</b> self	<b>Contractor Address:</b> Portland	<b>Phone</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Alterations - Dwellings	<b>Zone:</b>

<b>Dept:</b> Zoning	<b>Status:</b> Pending	<b>Reviewer:</b>	<b>Approval Date:</b>	<b>Ok to Issue:</b> <input type="checkbox"/>
<b>Note:</b>				
<b>Dept:</b> Building	<b>Status:</b> Pending	<b>Reviewer:</b>	<b>Approval Date:</b>	<b>Ok to Issue:</b> <input type="checkbox"/>
<b>Note:</b>				

**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.

\_\_\_\_\_  
SIGNATURE OF APPLICAN

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PHO

\_\_\_\_\_  
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PHO