

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

Location of Construction: 10 Island Ave. Peaks 04108		Owner: James Soley		Phone: 775-2252		Permit No: 991059	
Owner Address: 10 Island Ave. Peaks 04108		Lessee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: Self		Address:		Phone:		Permit Issued: SEP 28	
Past Use: Single Family		Proposed Use: Same		COST OF WORK: \$4,260.00		PERMIT FEE: \$54.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>93</i> Type: <i>513</i> <i>BOCA 95</i>	
Proposed Project Description: Construct deck w/Greenhouse				Signature:		Signature: <i>Hoffner</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: <i>I-B</i> CBL: 084-R-008	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>OK 9/27/99</i>	
Permit Taken By: KA		Date Applied For: GD/ September 17, 1999		Signature:		Date:	

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..

*any problems call Betsy at 775-2252
 *Mail To James Soley
 111 Commercial St.
 Portland, ME. 04101

**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: September 17, 1999 PHONE: _____

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

Special Zone for Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan major minor mm
1 family

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: *S*

CEO DISTRICT 2