City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: Location of Construction: Phone: 766-3303 *** 28 Oak Ave Peaks Island Janice Smith Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Address: SAA Permit Issued: Contractor Name: Phone: George Smith COST OF WORK: Past Use: Proposed Use: PERMIT FEE: \$1,000.00 \$30.00 single family same **FIRE DEPT.** □ Approved INSPECTION: Use Group & -> Type: 5 9 ☐ Denied CBL: Signature: Proposed Project Description: Zoning Approval: PEDESTRIAN ACTIVITIES DISTRICT (PAID.) Action: Approved Special Zone or Revie Approved with Conditions: 8x18 deck □ Shoreland Denied □ Wetland ☐ Flood Zone ∧ ☐ Subdivision Signature: Date: □ Site Plan maj □minor □mm □ Permit Taken By: Date Applied For: K April 19 2000 K Abut IR- 2 Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Aistoric Preservation INot in District or Landmark ☐ Does Not Require Review ☐ Requires Review PERMIT ISSUED WITH REQUIREMENTS Action: CERTIFICATION ☐ Appoved 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 □ Approved with Conditions 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, □ Denied 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 April 19 2000 SIGNATURE OF APPLICANT ADDRESS: PHONE: DATE:

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

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE