Cit	y of Portland, Maine	e - Build	ing or Use Pe	ermit .	Application	Pe	rmit No:	Issue Dat	e:	CBL:		
389	Congress Street, 0410	1 Tel: (2	07) 874-8703,	Fax: (2	207) 874-8716		20078227			085 P00	4001	
Location of Construction: Owner Name:						Owner Address:				Phone:		
35 WINDING WAY PARKER V			PARKER WAI	ALTER G JR & MARY		1 SOUTH ST						
Business Name:			Contractor Name:			Contractor Address:			Phone			
Lessee/Buyer's Name Phon			Phone:	Phone:		Permit Type:				1	Zone:	
Past	Use:		Proposed Use:			Permit Fee:		Cost of Wo	ork: CEO District:			
									\$0.00	2		
						FIRE		Approved Denied	Use G	CCTION:	Туре	
Prop	oosed Project Description:	<u> </u>										
	•					Signa	ture:		Signat	ure:		
						PEDESTRIAN ACTIVITIES DISTRIC			FRICT (	T (P.A.D.)		
						Action Approved Approv			proved v	ed w/Condition		
						Signa	ture:			Date:		
	nit Taken By: nartin	<b>Date A</b> 1 08/28	pplied For: /2007	Zoning Approval				l				
1.	This permit application	does not	preclude the	Special Zone or Rev		ews	Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting applicable Federal Rules.				horeland		☐ Variance			Not in District or Landma		
2.	Building permits do not include plumbing, septic or electrical work.		☐ Wetland			Miscellaneous		Does Not Require Revie				
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			Flood Zon			Conditional Us			Requires Review			
			a building	☐ Sī	ubdivision		☐ Interpretatio			Approved		
			Site Plan  Maj  Mino  MM			☐ Approved ☐ Denied			☐ Approved w/Condition ☐ Denied			
				Date:			Date:			Date:		
I ha juris shal	reby certify that I am the ve been authorized by the ediction. In addition, if a I have the authority to en uch permit.	e owner to permit for	make this appli work described	med prication	as his authorized application is iss	ne prop l agen sued, I	t and I agree certify that t	to conform he code offi	to all a cial's a	pplicable laws outhorized repres	of this sentative	
SIG	NATURE OF APPLICAN				ADDRES:	S		DATI	E	Pl	НО	

Location of Construction: 35 WINDING WAY	Owner Name: PARKER WALTER G		Owner Address: 1 SOUTH ST	Phone:	
Business Name:	Contractor Name:		Contractor Address:	Phone	
Lessee/Buyer's Name	Phone:	one: Permit Type: Zone:		Zone:	

## 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	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО