City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 000 Location of Construction: Owner: Phone: 196 Seashore Ave Peaks Island Chris Hoppin 766-2311 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: *** Leddy Houser Associates 64 Eastern Prom *** Paul or Pete 871-8083**** .III : 1 2000 PERMIT FEE: COST OF WORK: Past Use: Proposed Use: \$250,000 1,524,00 FIRE DEPT. Approved INSPECTION: 1 2 family vacant foundation only Use Group: A-3 Type: 5/3 ☐ Denied CBL: BOCAGG Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. Approved Action: Approved with Conditions: ☑ Shoreland Phase 2 build 2 family on foundation phase 1 permit # 000429 Denied П □ Wetland ☐ Flood Zone ... □ Subdivision Signature: Date: ☐ Site Plan mai Permit Taken By: Date Applied For: Ē. June 27 2000 K Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. 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.. ☐ Deni⁄ed **Historic Preservation** Not in District or Landmark PERMIT ISSUED WITH REQUIREMENTS □ Does Not Require Review ☐ Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 SIGNATURE OF APPLICANT ADDRESS: PHONE: PERMIT ISSUED3 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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

WATA REJUIREMENTS