City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: Dean Kamp Location of Construction: Phone: Permit No: 766-2062 04108 Peaks 71 Central Lessee/Buyer's Name: Phone: Owner Address: BusinessName: Same Permit Issued: Contractor Name: Address: Phone: 879-9787 P.O. Box 802 Portland 04104 Horizon Builders Inc. COST OF WORK: PERMIT FEE: Proposed Use: Past Use: AUG 1 7 2000 \$ 84.00 \$ 10,000.00 Same Single Family **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: Type: CBL: 087-GG-00 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Construct Bedroom Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone ☐ Subdivision Sec Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: GD Permit Taken By: August 11,2000 Gay1e **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ 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 □ Approved tion may invalidate a building permit and stop all work.. □ Deniæd Call Dean 766-2062 P/U Historic Preservation Not in District or Landmark ☐ Does Not Require Review WITH REQUIREMENTS ☐ 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 August 11,2000 ADDRESS: DATE: PHONE: SIGNATURE OF APPLICANT

PERMIT ISSUED WITH REQUIREMENTS RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: CEO DISTRICT White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector