City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: *107 Island Avenue P.I. 04108 *Tom & Karen McCuern 766-0064 Owner Address: Phone: Lessee/Buyer's Name: BusinessName: 107 Island Ave. P.I. ME 04108 Permit Issued Contractor Name: Address: Phone: Keith Hults 223 Island Ave. P.I., ME 04108 766-5780 **COST OF WORK:** Past Use: Proposed Use: PERMIT FEE: \$ 4,000 40.00 1-Family Same **FIRE DEPT.** □ Approved INSPECTION: Deck Use Group: R.3 Type 5 3 ☐ Denied BOCA96 Signature: Signature: / Zonin**b/**Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (Action: Approved Special Zone or Reviews Amendment to Permit #981050 to build deck. Approved with Conditions: Ashoreland Nu 75 Denied □ Wetland ☐ Flood Zone Signature: ☐ Subdivision Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: UB 6-18-99 **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. 2. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation tion may invalidate a building permit and stop all work... ☐ Approved □ Denied **Historic Preservation** □ Not in District or Landmark ☐ Does Not Require Review PERMIT ISSUED ☐ Requires Review WITH REQUIREMENTS 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 6-18-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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

CEO DISTRICT