## Location of Construction: Owner: Phone: Permit No: 9111 \*\* \*\*43 Bracket Ave. Peaks Island 04108 Paula Boulton 766-2515 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Contractor Name: Phone: Address: 2 1000 Robert Davis 766-5531 **NCT** COST OF WORK: **PERMIT FEE:** Past Use: Proposed Use: \$ 5,000 \$ 54.00 FIRE DEPT. Approved INSPECTION: 1-Family Same Use Group: 13 Type: 513 □ Denied CBL:087-L+L-017 BOCA96 Zone: Signature: Signature: 📈 Proposed Project Description: Approval: PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) Screened porch & Deck. 14x14.7 - Deck 9x24 Action: Approved Special Zone or Reviews Approved with Conditions: $\Box$ Shoreland N/ADenied □ Wetland Flood Zone □ Subdivision Signature: Date: □ Site Plan mej □minor □mm □ Permit Taken By: Date Applied For: KA 10-1-99 8464 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. Conditional Use 3. 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.. Paula Boulton Denied \*\* Please SEnd To: 43 Bracket Ave. Historic Preservation Peaks Island, ME 04108 ☑ Not in District or Landmark Does Not Require Review □ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS 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 □ Approved with Conditions 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 10 - 1 - 99SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: 3 **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT** ub White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716