

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

Location of Construction: *** 101 Central Ave Peaks Island		Owner: *** Chris Alves		Phone: 766-2158	Permit No: <b>000290</b>
Owner Address: SAA	Lessee/Buyer's Name:	Phone:	BusinessName:		
Contractor Name: SAA	Address:		Phone:		
Past Use:  single family	Proposed Use:  same	COST OF WORK: \$ 15,000	PERMIT FEE: \$ 114.00	Permit Issued:  APR 11	
Proposed Project Description:  Building living space above existing garage for mother <u>Not an apartment (Accessory Detached Structure)</u>		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: 5B BOCA 99 Signature: <i>Huffer</i>		
		Signature:		Date:	
Permit Taken By:  K		Date Applied For: Feb 22 2000 K			

Zone: IR-2 CBL: P-010 211  
 Zoning Approval: *with conditions*  
 Special Zone or Reviews:  
 Shoreland *N/A sect.*  
 Wetland  
 Flood Zone *14-43 used*  
 Subdivision  
 Site Plan maj  minor  mm   
 0150P

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**  
 Approved  
 Approved with Conditions  
 Denied  
 Date: *[Signature]*

**PERMIT ISSUED 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 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 provisions of the code(s) applicable to such permit

Feb 22 2000

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

**PERMIT ISSUED WITH REQUIREMENTS** 1