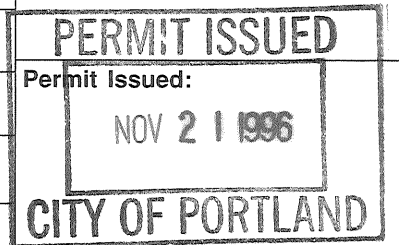


**City of Portland, Maine – Building or Use Permit Application** 339 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Permit No: **961157**

Location of Construction: 81 Upper A Street, Peaks Island 04108		Owner: Carol Young		Phone: 766-2795	
Owner Address:		Leasee/Buyer's Name:		Phone:	
Contractor Name: Rob DiSouza		Address:		Phone: 766-2920	
Past Use: Single Family		Proposed Use: same w/ exterior reno		BusinessName:	
Proposed Project Description: Exterior renovations as per plans		COST OF WORK: \$200.00		PERMIT FEE: \$25.00	
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: R3 Type: 5B DOCA 96 Signature: <i>Hoffer</i>	
Signature:		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature:	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Date:	
Permit Taken By: <b>EX Vicki Dover</b>		Date Applied For: 11/15/96			



Zone: **87-IT-34** CBL: *Hoffer*

Zoning Approval: *19/Nov/96. Hoffer*

**Special Zone or Reviews:**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

**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: 11/18/96

*J. Andrews*

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.  
 2. Building permits do not include plumbing, septic or electrical work.  
 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

Mail to owner

**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 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

*Carol Young*  
 SIGNATURE OF APPLICANT Carol Young ADDRESS: 81 Upper A Street, Peaks Island DATE: 11/15/96 PHONE: 766-2795

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 **6**  
*M. Leary*

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

Location of Construction: 81 Upper A Street, Peaks Island 04108		Owner: Carol Young		Phone: 766-2795		Permit No: <b>961187</b>
Owner Address:		Leasee/Buyer's Name:		Phone:		
Contractor Name: Rob D'Souza		Address:		Phone: 766-2920		Zoning Approval: 19/Nov/96 [Signature] Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
Past Use: Single Family		Proposed Use: same w/ exterior reno		COST OF WORK: \$ 200.00 PERMIT FEE: \$ 25.00 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: A3 Type: 53 BOA 86 Signature: [Signature]		
Proposed Project Description: Exterior renovations as per plans		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: _____ [Signature]
Permit Taken By: EX Vicki Dover		Date Applied For: 11/15/96				

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

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SIGNATURE OF APPLICANT Carol Young ADDRESS: 81 Upper A Street, Peaks Island DATE: 11/15/96 PHONE: 766-2795

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   
 [Signature]

COMMENTS

12-12-86 Sub w all completed

Inspection Record

Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____

CAROL YOUNG  
81 Upper A St  
Peaks Island  
04108

766-2795

project:

Move exterior door from gable end  
of house to West side of house.

No wiring.

No plumbing

Cost = \$200

