City of Portland, Maine – Buildin	g or Use Permit Applicatio	n 339 Congress	s Street, (04101, Tel: (207) 87	74-8703, FAX: 874-8716
Location of Construction: Owner:			Phone:	Permit No:96115	
81 Upper A Street, Peaks Island					
Owner Address:	Leasee/Buyer's Name:	Phone:	ne: BusinessName:		PERMIT ISSUED
Contractor Name:	Address:	Phon	ie:		Permit Issued:
Rob DiSouza			6-2920		NOV 2 LIGHT
Past Use:	COST OF WORK: PERMIT FEE:			NOV 2 1996	
	Proposed Use:	\$200.00		\$25.00	
Single Family	same w/exterior reno				CITY OF PORTLAND
bingic ramity	Same w/exterior reno	FIRE DEPT. Approv		INSPECTION:	CITT OF TUNILARD
			Denied	Use Group: R3 Type: 57	Zone: CBL: - 777
		~.		BOCA 96/11	Zone: CBL: 7 7 7-34
Proposed Project Description:		Signature:		Signature: Hoffer	Zoning Approval:
1 Toposed 1 Toject Description.		PEDESTRIAN A	ACTIVITIE	S DISTRICT (P.U.D.)	Zoning Approval:
		Action:	Approved	Special Zone or Reviews:	
Exterior renovations as per plan	S		Approved v	vith Conditions:	☐ Shoreland
1			Denied		☐ Wetland
					☐ Flood Zone
		Signature:		Date:	☐ Subdivision
Permit Taken By:	Date Applied For:				☐ Site Plan maj ☐ minor ☐ mm ☐
K X Vicki Dover		15/96			-
					Zoning Appeal
1. This permit application doesn't preclude the A	Applicant(s) from meeting applicable St	ate and Federal rules.			☐ Variance
2. Building permits do not include plumbing, se	☐ Miscellaneous				
3. Building permits are void if work is not started		wanaa Ealaa informa			☐ Conditional Use☐ Interpretation
tion may invalidate a building permit and sto		uance. raise imonna-			☐ Approved
tion may invalidate a building permit and sto	p an work				☐ Denied
					Deflied
					Historic Preservation
					☑ Nøt in District or Landmark
					Does Not Require Review
Mail to owner	☐ Requires Review				
					Action:
	CERTIFICATION				☐ Appoved
I hereby certify that I am the owner of record of the	named property, or that the proposed w	ork is authorized by th	ne owner of r	ecord and that I have been	☐ Approved with Conditions
authorized by the owner to make this application a	☐ Denied / /				
if a permit for work described in the application is	sued, I certify that the code official's a	uthorized representati	ve shall have	e the authority to enter all	1/10/19/
areas covered by such permit at any reasonable ho	ur to enforce the provisions of the code	(s) applicable to such	permit	,	Date:
	-		•		
(/c, 10 ()					
CICHATURE OF A POY ICANTO	81 Upper A Street, Pe	aks Island 7	66-2795	11/15/96 PHONE:	1 1x Hadray
SIGNATURE OF APPLICANT Carol Young	ADDRESS:	DATE:		PHONE:	1 . 1 , 1 , 1 , 2 , 2 , 3
RESPONSIBLE PERSON IN CHARGE OF WORK	X, TITLE			PHONE:	CEO DISTRICT 6
White_Pe	rmit Desk Green–Assessor's Cana	arv-D.P.W. Pink-Pu	hlic File Is	vory Card-Inspector	
	Con Con Addodor & Care	y		ory vara-mapectur	Min, Leary
					6

Location of Construction:	Owner: Carol Young	The state of the s	Phone:		Permit No:
81 Opper A Street, Peaks I Owner Address:	Leasee/Buyer's Name:	Phone:	BusinessNa	me:	-30119,
G N	Address:	Pho	one:		Permit Issued ISSUED
Contractor Name: Rob DiSousa	Address.		766-2920		
Past Use:	Proposed Use:	COST OF WO		ERMIT FEE: 25.00	NOV 2 1 1996
Single Family	same w/exterior reno	Signature:	Denied U	SPECTION: se Group: 17 Type: 5 3 300 7 6 gnature:	CITY OF PORTLAND Zone: OBL: Zoning Approval: Z
Proposed Project Description:	•			DISTRICT (P.U.Y).	19/100/96 /4 THOSE
Exterior renovations as pe	Action:	Approved Approved with Denied	Special Zone of Tyeviews. Shoreland Wetland □ Flood Zone		
		Signature:		Date:	☐ Subdivision☐ Site Plan maj☐ minor☐ mm [
Permit Taken By:	Date Applied For:	1/15/96			Zoning Appeal
 This permit application doesn't precl Building permits do not include plus Building permits are void if work is a tion may invalidate a building perm 	□ Variance □ Miscellaneous □ Conditional Use □ Interpretation □ Approved □ Denied				
Hail to owner					Historic Freservation ☐ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review
				8	Action:
authorized by the owner to make this applied a permit for work described in the app	CERTIFICATION cord of the named property, or that the propose plication as his authorized agent and I agree to blication issued, I certify that the code official conable hour to enforce the provisions of the	to conform to all applications authorized represent	able laws of this j tative shall have t	urisaiction. In addition	1,
SIGNATURE OF APPLICANT Carol	81 Upper A Street, ADDRESS:	Peaks Island DATE:	766-2795 Pl	11/15/96 HONE:	- D. Madred.
RESPONSIBLE PERSON IN CHARGE				HONE:	CEO DISTRICT

COMMENTS

		1 Amerika		
 12-12-86	Think to all	Link Allen		
		#		
 6				
	·			
Φ.				
		·		
			Inspection Record	
		Туре	_	Date
		Foundation:		
		Framing:		
		Other:		

CAROL YOUNG
81 Upper A ST
Peaks Island
04108
766-2795

Move extenor door from gable end of house to & west side of house.

No plumbly
Cost = \$200



