

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

Location of Construction: 362 Island Ave. Peaks Island		Owner: Keith Babcock		Phone: 766-9725		Permit No: 981204	
Owner Address: State		Lessee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: Bob Davis		Address: 362 Island Ave. Peaks Island, ME		Phone: 766-5531		Permit Issued: OCT 21 1998	
Past Use: Summer Home		Proposed Use: Summer Home with shed built		COST OF WORK: \$ 1,700		PERMIT FEE: \$ 30.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: U Type 5R BOCS 96	
				Signature:		Signature: <i>[Signature]</i>	
Proposed Project Description: Build Garden Shed 10'x10' with HIP Roof one window, one door.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: CBL: IF-2 050-B-007	
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: OK 100 # nbs Special Zone or Reviews: <input checked="" type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone Zone C <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: UB		Date Applied For: October 14, 1998		Signature:		Date:	

- This permit application does not 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.

Mail to: Bob Davis
Island Avenue
Peaks Island, Maine 04108 766-5531

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

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

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]*

CEO DISTRICT 2

COMMENTS

4-7-99 Visited site set Backs saw the Back a slight? on the
Rear line with no one to show me the line Shed is 10' x 10'.
I left a tag asking for Jack studs under window header (TR)

5-24-99 checked Shed all corrections are made close
Permit. (TR)

B

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