Permit No:99 Location of Construction: Owner: Phone: 066 Weens King 412-531-6607 Peaks Island ME 04108 23 Sargent Road Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 1393 Washington Rd Pittsburg, PA 15228 Permit Issued: Contractor Name: Address: Phone: ***Keith Aults 223 Island Ave. PI, Maine 04108 766-5780 **JN 2 4 1999 COST OF WORK: PERMIT FEE:** Past Use: Proposed Use: \$ 1,200 \$ 25.00 Same 1-Family **FIRE DEPT.** \Box Approved **INSPECTION:** □ Denied Use Group: Type: 5/5 CBL: 090-D-007 Zone: BOCA 96 Signature: Signature: **Proposed Project Description:** Approval: PEDESTRIAN ACTIVITIES DISTRICT (PA Action: Approved Construct 10 x 10 storage shed. Approved with Conditions: Shoreland Nrc Permit taken previously, but was not built. Denied □ Wetland □ Flood Zone □ Subdivision Signature: Date: Site Plan maj Dminor Dmr Date Applied For: Permit Taken By: ub 6-18-99 **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 □ Approved tion may invalidate a building permit and stop all work.. Denied Historic Preservation Not in District or Landmark Does Not Require Review □ Requires Review PERMITISSUED WITH REQUIREMENTS Action: 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 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, Denied 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 6 - 18 - 99SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: **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