Location of Construction: Owner: Phone: Permit No: 781-237-4054 539 Island Ave. Peaks Island John & Sarah MacLeod 000204 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 193 Bristol Road, Wellesley, MA 02481 N/A N/A N/A Permit Issued: Address: Contractor Name: Phone: Ric Weinschenk Builders 33 Island Ave. Peaks Island, ME 207-828-3900 COST OF WORK: 20 **PERMIT FEE:** Past Use: Proposed Use: \$ 78,000 \$ 492.00 1-Family Same FIRE DEPT. Approved **INSPECTION:** □ Denied Use Group: R-3Type: 5/3 CBL Zone BOCA99 090-R-003 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (A.A.D.) Action: Approved Renovate 1st floor of existing home expand 2nd floor. Special Zone or Review Approved with Conditions: □ Shoreland STA SMAIL SE Denied □ Wetland □ Flood Zone □ Subdivision Signature: Date: □ Site Plan mai □mino Date Applied For: Permit Taken By: UB 3 - 14 - 00OM Zoning Appe □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. 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 **Call for Pick Up Ric Wortley Historic Preservation Not in District or Landmark 828-3900 Does Not Require Review PERMIT ISSUED □ Requires Review WITH REQUIREMENTS Action: CERTIFICATION Approved with Cendition 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 Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 3 - 14 - 00**SIGNATURE OF APPLICANT** ADDRESS: DATE: PHONE: PERMIT ISSUED **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: CEOPOISTRIC 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