

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

Location of Construction: 522 Island Avenue, Peaks Island		Owner: Theodore Haykal		Phone: 766-4454		Permit No: 970077	
Owner Address: same		Leasee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: JAN 31 1997 CITY OF PORTLAND </div>	
Past Use: Single fam dwelling		Proposed Use: Same w/ext reno		COST OF WORK: \$1,250.00 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature:		PERMIT FEE: \$25.00 INSPECTION: Use Group 93 Type 5B Signature: <i>[Signature]</i>	
Proposed Project Description: Ext reno as per plans		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		Zoning Approval: <i>See previous</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>not in</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>		Zone: EB CBL: 90-AA-4 Zoning Approval: <i>See previous</i> Special Zone or Reviews: <i>OK to have permits 1/17/97</i> 1/30/97	
Permit Taken By: Vicki Dover		Date Applied For: 1/24/97					

- 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..

Mail to owner

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 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 Theodore Haykal ADDRESS: 522 Island Ave., Peaks 04108 DATE: 1/24/97 PHONE: 766-4454

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:
 White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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: 1/27/97
D. Anderson

CEO DISTRICT 6
M. Leary