City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: ** ** 865-2056 Lessee/Buyer's Name: Lars F & Anne Asbjornsen Phone: 562 Island Ave., Peaks Island, ME Owner Address: BusinessName: 20 Carriage Rd. Freeport, ME Permit Issued: Address: Contractor Name: Phone: COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$6,140.00 \$66.00 Single Family Same FIRE DEPT. Approved INSPECTION: Use Group 8-3 Type:5/3 ☐ Denied CBL: BOC 4 99 092-A-019 Signature: Signature: Hes Proposed Project Description: Zoning Approval: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Replace & raise roof Special Zone or Reviews □ Shoreland to rea Approved with Conditions: Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: k June 13, 2000 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ 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** Mot in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: **CERTIFICATION** □ Appoved 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 permit of any reasonable hour to enforce the provisions of the code(s) applicable to such permit WITH REQUIREMENTS June 13, 2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: PERMIT ISSUED

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE