Location of Construction: Owner[.] Phone: Permit No: 11 Island Ave, Peaks Island Michael Langella 892-5216 99013 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 17 Laskey Rd Windham, ME 04062 Permit Issued: Address: Contractor Name: Phone: Owner/SAA FEB 1 9 1999 COST OF WORK: **PERMIT FEE:** Past Use: Proposed Use: \$ 130,000.00 \$ 670.00 Vacant Land 1-fam Dwelling FIRE DEPT. Approved **INSPECTION:** Use Group: **R3**Type:54 □ Denied Zone: CBL: MOCA41 092-E Signature: Signature: Proposed Project Description: Annarova PEDESTRIAN ACTIVITIES DISTRICT (D.) Action: Approved Construct Single Family Dwelling (No Garage) Approved with Conditions: De Shoreland Denied □ Wetland □ Flood Zone 7 Signature: □ Subdivision Date: ⊠Site Plan maj ⊡minor Permit Taken By: Date Applied For: SP/MG 22 January 1999 **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 tion may invalidate a building permit and stop all work.. Denied Historic Preservation Not in District or Landmark PERMIT ISSUED Does Not Require Review WITH REQUIREMENTS □ Requires Review Action: CERTIFICATION Devoga 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 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 25 January 1999 SIGNATURE OF APPLICANT ADDRESS: PHONE: DATE: **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: CEO DISTRICT

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

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