City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No:Q Location of Construction: Owner: Phone: 622 Island Ave. Peaks 04108 Katherine Lasky (207) 766-2934 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Permit Issued: Address: *P.O. Box 5096 Portland 04101 Contractor Name: Phone: MAY 2 6 1999 *Jim Pelletier 874-2382 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: Single Family Same \$35.00 \$3,000.00 INSPECTION: **FIRE DEPT.** □ Approved Use Group: \$7 Type: 54 □ Denied 092-A-8/10/23 Signature: Proposed Project Description: Zonipa Approval PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Screen Porch Approved with Conditions: Denied ☐ Flood Zone . □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: S.P. May 19th, 1999 **Zoning Appeal** □Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved 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 ☐ 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 □ 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit May 19th, 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

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

2

CEO DISTRICT