City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Phone: 2v 401-831-3487 Owner: Robert W. Kenny Jr. & Carole Kenny Location of Construction: Permit No: Anderson Avenue - Little Diamond Island PER: Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 67 Taber Ave. Providence RI 02906 Permit Issued: Address: Phone: Contractor Name: Philip H. Lee 24 Catherine St. Ptland, ME 04102 772-5739 191959 **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: \$ 5,000 \$ 45.00 Same 1-Family CITX+OF PORT **FIRE DEPT.** □ Approved INSPECTION: Use Group 3 Type 5/ ☐ Denied MOCA46 105-D-004 Signature: Signature: 1 Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (Action: Approved Add 2 small dormers to front elevation of two existing Special Zone or Revi Approved with Conditions: bedrooms. DSHoreland 300CF Denied □ Wetland ☐ Flood Zone □ Subdivision A CV Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: 5-11-99 Zoning Appeal □ Variance \(\overline{\chi_k}\). 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 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 Prese ☐Not 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 ☐ 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 5-11-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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