

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

Location of Construction: Church Street, Cliff Island (IslandAve)		Owner: William M. O'Reilly	Phone: 766-5172	Permit No: 991236
Owner Address: P.O. Box 37, Church St. Cliff Island, ME 04019		Lessee/Buyer's Name: SAA	Phone: SAA	Business Name: N/A
Contractor Name: Owner		Address: SAA	Phone: SAA	Permit Issued:
Past Use: 1-Family	Proposed Use: Same	COST OF WORK: \$ 1,000	PERMIT FEE: \$ 30.00	Zone: IR-1 CBL: 109B-F-36 109B-F-036 Zoning Approval: <i>OK 11/8/99</i> Special Zone or Reviews: <input checked="" type="checkbox"/> Shoreland <i>with HWM?</i> <input type="checkbox"/> Wetland <i>HWM</i> <input type="checkbox"/> Flood Zone <i>Zone 'C'</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> 169154
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group A-3 Type: 53 <i>BOCA 96</i>	
Proposed Project Description: 8 x 20 addition. A bedroom		Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		
Permit Taken By: UB	Date Applied For: 10-22-99			

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

*** Send To: William M. O'Reilly
 P.O. Box 37
 Church Street
 Cliff Island, Maine 04019

**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 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

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: 10-22-99 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

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
 Date: _____ *[Signature]*

**PERMIT ISSUED
WITH REQUIREMENTS
CEO DISTRICT**
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