

Location of Construction: 51 Fessenden Street		Owner: Brion Woods		Phone: 781-5977		Permit No: <b>001254</b>	
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: *** Joseph Kinney		Address: **** 75 Arcadia Street 04103		Phone: 776-2782		Permit Issued:	
Past Use:  single family		Proposed Use:  sam e		COST OF WORK: \$40,000		PERMIT FEE: \$264.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group R-3 Type: 5B <i>BOCA 94</i>	
Proposed Project Description:  addition to house 8x20 <i>160 ft</i>		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature:		Signature: <i>[Signature]</i>	
Permit Taken By:  K		Date Applied For:  Oct 31 2000		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>[Signature]</i> 11/1/00 Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>to remain</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <i>1-1-00</i> <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

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..

**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: October 31 2000 K PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

PERMIT ISSUED WITH REQUIREMENTS

- Zoning Appeal**
- Variance
  - Miscellaneous
  - Conditional Use
  - Interpretation
  - Approved
  - Denied

- 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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