

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

Location of Construction: 30 Highland Ave.		Owner: Ann Marie Malone		Phone: 450-8002 774-2996		Permit No:  9 11 1
Owner Address: SAA		Lessee/Buyer's Name: N/A		Phone: N/A		
Contractor Name: Monahhan Woodworks		Address: Commercial Street		Ptld 772-6726		Zone: <b>R-3</b> CBL: 121-C-012 Zoning Approval: <i>[Signature]</i> 11/29/99 <b>Special Zone or Reviews!</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> <b>10,500</b> <b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied  <b>Historic Preservation</b> <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review  <b>Action:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied  Date: <i>[Signature]</i>
Past Use: 1-Family		Proposed Use: Same		COST OF WORK: \$ 15,000		
Proposed Project Description:  Family Room addition.		Signature:		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <b>R-3</b> Type: <b>5B</b> <b>BOCA 1996</b> Signature: <i>[Signature]</i>
				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: 11-24-99				

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..

\*\* Please call for pickup: Ann Marie Malone  
450-8002

**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: 11-24-99	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

**PERMIT ISSUED WITH REQUIREMENTS**

CEO DISTRICT UB

2