Locati	on of Construction:	Owner:		Phone:	Permit No: 98052
	62 Prospect St	Janet & Dani	el Pierce	772-5733	
Owner	Address: SAA	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
Contra	ctor Name:	Address:	Phone:		Pernit Issued:
	Willow Ledge Builders	P.O. Box 859 Yar	mouth, ME 04096	846-6944	MAY 2 0 1998
Past U	se:	Proposed Use:	COST OF WORK:		
			\$ 5,960.00	\$ 50.00	CITY OF PORTLAND
	l-fam	Same	FIRE DEPT. 🗆 A <sub>l</sub>	pproved INSPECTION:	
			□ De		Zone: CBL:
			0.	Bocagal	<b>Zone: CBL</b> : $124-E-003$
Propos	ed Project Description:		Signature:	Signature: Hold	Zoning Approval: OK
				· ////	15/MA 1/98 200
					· Special Zone or Reviews?
	Remodel Bathroom				□ □ Shoreland
			Signature:	Date:	
Permit	Taken By:	Date Applied For:			□ Site Plan maj □minor □mm [
			14 May 1998		Zoning Anneal
1 '		a the Applicant(a) from meeting applicable	State and Federal rules		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.					
	Building permits do not include plumbing, septic or electrical work.				Conditional Use
	ilding permits are void if work is not started within six (6) months of the date of issuance. False informa-				
t	ion may invalidate a building permit ar	Approved Denied			
					Historic Preservation Not in District or Landmark Does Not Require Review Requires Review
					Action:
autho if a p	orized by the owner to make this applicate the applicate of the applicate	<b>CERTIFICATION</b> of the named property, or that the proposed ation as his authorized agent and I agree to ion is issued, I certify that the code official ble hour to enforce the provisions of the co	conform to all applicable l 's authorized representative	aws of this jurisdiction. In additions and the state of t	n, Denied
		-	*		( /'
			15 May 1998		$\subseteq$
SIGN	ATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	- com
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE					
RESP	ONSIBLE PERSON IN CHARGE OF	WORK, TITLE		PHONE:	

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