

<b>Project Address:</b>		
<b>Total Square Footage of Proposed Structure/Area:</b>  2200	<b>Area of lot (total sq. ft.):</b> Garage: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Attached <input type="checkbox"/> Detached <input type="checkbox"/> Sq. Ft.: _____	Number of Stories: <u>2</u> Number of Bathrooms: <u>2 + 2 1/2</u> Number of Bedrooms: <u>4</u>
<b>Tax Assessor's Chart, Block &amp; Lot(s):</b> Chart#      Block #      Lot #		
Current legal use: <u>2 FAMILY</u> Number of Residential Units <u>2</u> If vacant, what was the previous use? <u>2 FAMILY FIRE ON 5/28/16</u> Is property part of a subdivision? <u>NO</u> If yes, please name _____ Project Description:		
<b>APPLICANT</b> – (must be owner, Lessee or Buyer)		
Name: <u>SALLY TRUSSELL</u> Business Name, if applicable: <u>TRUSSELL PROPERTIES, LLC</u> Address: <u>26 ATLANTIC DR</u> City/State: <u>SCARBOROUGH</u> Zip Code: <u>04074</u>	Work # Home# Cell # <u>329-0492</u> e-mail: <u>PMGROUP@MAINE.RR.COM</u>	
<b>OWNER INFORMATION</b> – (if different from Applicant)		
Name: Address: City/State:                      Zip Code:	Work # Home# Cell # e-mail:	
<b>CONTRACTOR INFORMATION:</b>		
Name: Address: City/State:                      Zip Code: Phone Number:	Contact when Building Permit is Ready: Name: Phone Number: & E:Mail:	