

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

Location of Construction: ***159 Ocean Ave.		04103	Owner: ** Kevin M. Powell	Phone: 780-0868	Permit No: 1855
Owner Address: SAA	Lessee/Buyer's Name:		Phone:	BusinessName:	
Contractor Name: Owner	Address:		Phone:		
Past Use: 2-Family	Proposed Use: Same	COST OF WORK: \$ 6450.		PERMIT FEE: \$ 66.00	
Proposed Project Description: Erect above ground pool 27 x 52 Circular with 16x38x54 deck.		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group R-3 Type: 52	
		Signature: _____		Signature: <i>Hoffe</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>2 unit ok per micro lot</i>	
		Signature: _____		Date: _____	
Permit Taken By: UB	Date Applied For: 8-9-99		Special Zone of Reviews: <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"/>		

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..

***** Mail To: Kevin M. Powell
159 Ocean Ave.
Portland, ME 04103

**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: 8-9-99 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

Zone: *RE/R3* CBL: 139-B-002
8/12/99
Action:
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied
Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review
Date: _____
CEO DISTRICT 2
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