City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 991335 * Karl Geib & Dawn Carrigan **105 Parsons Road 04103 774-6265 Lessee/Buyer's Name: BusinessName: Owner Address: Phone: N/A SAA SAA N/A Permit Issued: Contractor Name: Address: Phone: SAA Homeowner COST OF WORK: PERMIT FEE: Proposed Use: Past Use: \$ 132.00 \$ 18,000 Lit G FIRE DEPT. □ Approved INSPECTION: 1-Family Same Use Group: R-3 Type: 5 P ☐ Denied Zone: CBL: BOCA 96 139-J-007 Signature: Sionature: Zoning/Approval:/ Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT П Action: Approved Special Zone or Reviews Renovation of existing kitchen and 1st floor of Approved with Conditions: □ Shoreland N attached garage. Denied П □Wetland ☐ Flood Zone the □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: UB 11-30-99 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2.. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work... ☐ Deried ***Please Send To: Karl Geib and Dawn Carrigan 105 Parsons Road Historic Preservation Portland, ME 04103 Not in District or Landmark □ Does Not Require Review □ Requires Review Action: CERTIFICATION □ Appoved ☐ Approved with Conditions 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 □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 11-30-99 ADDRESS: DATE: PHONE: SIGNATURE OF APPLICANT PERMIT ISSUED

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

CHOREDSTRIETS

UB