

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

Location of Construction: 40 Austin Street		Owner: Eugene Snyder		Phone: 773-1866		Permit No: <div style="border: 1px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED NOV 20 1999 CITY OF PORTLAND </div>		
Owner Address: SAA		Lessee/Buyer's Name:		Phone:			BusinessName:	
Contractor Name: *** Advanced Sunroom Concepts		Address: 35 Harden Ave, Camden ME 04843		Phone: 236-0774			Permit Issued: 	
Past Use: 1-Family		Proposed Use: Same		COST OF WORK: \$ 30,500 PERMIT FEE: \$ 210.00 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: A3 Type: 53 Signature: <i>[Signature]</i> Signature: <i>[Signature]</i>			Zone: # 140-F-025 CBL: 	
Proposed Project Description: on S.E. side build 12x12 addition split in center by load-bearing wall 1/2 open to living room 1/2 open to bedroom (Gambrel Roof)				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		Zoning Approval: Special Zone or 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"/>		
Permit Taken By: <i>[Signature]</i>		Date Applied For: 8-16-99						

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 Send To: Gareth W. Gordon
Advanced Sunroom Concepts
35 Harden Ave.
Camden, ME 04843

**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

8-16-99 8-16-99

SIGNATURE OF APPLICANT ADDRESS: DATE: 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

Zoning Appeal
☐ Variance
☐ Miscellaneous
☐ Conditional Use
☐ Interpretation
☐ Approved
☐ Denied

Historic Preservation
☐ Not in District or Landmark
☐ Does Not Require Review
☐ Requires Review

Action:
☐ Approved
☐ Approved with Conditions
☐ Denied

Date: _____

CEO DISTRICT

