

Location of Construction: 17 Cornell St. Portland 04102		Owner: Ann Sawyer		Phone: (207) 773-0097		Permit No: <b>990514</b>	
Owner Address: 17 Cornell St. Portland 04102		Lessee/Buyer's Name:		Phone:			BusinessName:
Contractor Name: Dave MacDonald		Address: 11 Wing Ave. New Gloucester		Phone: * (207) 926-3514*		Permit Issued: <b>PERMIT ISSUED</b> MAY 21 1999	
Past Use: Single Family		Proposed Use: Same		COST OF WORK: \$16,000.00 PERMIT FEE: \$100.00			
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <b>93</b> Type <b>5B</b> Signature: <i>[Signature]</i>		Zone: <b>AS</b> CBL: 151-D-031 Zoning Approval: <i>[Signature]</i> 5/20/99 Special Zone on Review: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>Free</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> <i>6, 5-307</i>	
Proposed Project Description: Construct Addition		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature: _____ Date: _____			
Permit Taken By: S.P.		Date Applied For: May 14th, 1999				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

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..

Call For Pick Up  
926-3514

**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: May 14th, 1999	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:

Approved  
 Approved with Conditions  
 Denied

Date: *[Signature]*