

Location of Construction: 9 Frye St		Owner: Train, Daniel & Mary		Phone: 774-4967	
Owner Address: SAA 04103		Lessee/Buyer's Name:		Phone:	
Contractor Name:		Address:		Phone:	
Past Use:  1-fam		Proposed Use:		COST OF WORK: \$	
				PERMIT FEE: \$ 25.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: Type:	
				Signature: <i>[Signature]</i>	
Proposed Project Description:  Change Use from 1-fam to 1-fam w/daycare - max 6 children		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Signature: _____ Date: _____	
		Action: Approved <input type="checkbox"/>			
		Approved with Conditions: <input type="checkbox"/>			
		Denied <input type="checkbox"/>			

Permit No: **980875**

**PERMIT ISSUED**

Permit Issued:  
**AUG 10 1998**

**CITY OF PORTLAND**

Zone: *R-3* CBL: 160-E-031

Zoning Approval: *OK with conditions*

**Special Zone or Reviews:**

Shoreland *8/5/98*

Wetland

Flood Zone

Subdivision

Site Plan maj  minor  mm

**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: *[Signature]*

Permit Taken By: MG	Date Applied For: 31 July 1998
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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..

**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

**PERMIT ISSUED WITH REQUIREMENTS**

SIGNATURE OF APPLICANT	ADDRESS:	DATE: XXXXXXXX 03 august 1998	PHONE:
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	PHONE:
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CEO DISTRICT 2

*KC/TR*