Permit No: 981087 Location of Construction: Owner: Phone: 761-0492 172 Murray St Abbott/Kunkel PERMIT ISSUED Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Jeremy Rossa Cole/SAA Permit Issued: Contractor Name: Phone: Address: SFP 2 5 1998 COST OF WORK: **PERMIT FEE:** Past Use: Proposed Use: \$ \$ 25.00 **CITY OF PORTLANE** 1-fam Same FIRE DEPT. Approved **INSPECTION:** Use Group: **R** 3 Type: 5 13 □ Denied w/Home Occ Zone: BOCAGL CBL: 161-A-010 Signature: Signature: He llei Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) Zoning Approval Action: Approved Special Zone or Review Approved with Conditions: □ Shoreland Change Use from 1-fam to 1-fam w/Home Occ Denied □ Wetland □ Flood Zone Signature: □ Subdivision Date: □ Site Plan maj □minor □mm □ Permit Taken By: Date Applied For: SP 22 Sept 98 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation tion may invalidate a building permit and stop all work... Denied Historic Preservation PERMIT ISSUED WITH IN YOUR MENTS □ Not-in District or Landmark Does Not Require Review □ Requires Review Action: CERTIFICATION □ 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 22 SEpt 98 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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