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

ocation of Construction: 61 Inverness St. 04103 Owner: Janet Kantz		Phone: ***775–1635		Permit No: 08 + 5
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	
SAA				
Contractor Name:	Address: Phone:			Permit Issued:
Mainely Tubs 883-6357				
Past Use:	Proposed Use:	COST OF WOR		
		<u> </u>	\$ 30.00	
S/f	same	FIRE DEPT. □		
			Denied Use Group: $\mathcal U$ T	ype;
			BOCA991	Zone: CBL: 168 G005
		Signature:	Signature:	plan 7
Proposed Project Description:		PEDESTRIAN A	ACTIVITIES DISTRICT/J/	A.D.) Zoning Approval:
		Action:	Approved	Special Zone or Reviews:
Place hot tub on deck	Approved with Conditions: Denied		□ □ Shoreland □	
			□ □ Wetland	
				□ Flood Zone ②1//O↑
		Signature:	Date:	□ Subdivision ((C
Permit Taken By: NBW	Date Applied For:	. 00 0000		☐ Site Plan maj ☐minor ☐mm ☐
	Jul	y 28, 2000		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
• • • • • • • • • • • • • • • • • • • •				□ 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	☐ Approved			
				□ Denied
PLEASE CALL JANET @ 775-1635				Historic Preservation
				Not in District or Landmark
	☐ Does Not Require Review			
			- CUTB	☐ Requires Review
			PERMIT ISSUED	re la
			PERMIT 13364 WITH REQUIREMENT	Action:
	CERTIFICATION		40.00	□Appoved
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				enter all
areas covered by such permit at any reasonable				Date:
areas covered by such persons as any reasons.	1	() 11	1	
		7/00/00		
AND	ADDRESS	7/28/00	DUONE	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	PERMIT ISSUED
				PERMIT ISSUED WITH REQUIREMENTS
RESPONSIBLE PERSON IN CHARGE OF W	ORK, TITLE		PHONE:	CEO DISTRICT 2
RESI STIBLE I ERSOTT IT CHARGE OF W	, *********************************		, IIO, II.	CEO DISTRICT 2
White	–Permit Desk Green–Assessor's (Canary-D.P.W. Pink-P	ublic File Ivory Card-Inspe	ctor