

Location of Construction: 27 Felicia Lane		Owner: ***Robert & Christine Rodney		Phone: ***772-9748		Permit No: 000838		
Owner Address: Same		Lessee/Buyer's Name:		Phone:			BusinessName:	
Contractor Name: Bob Rodney Masonery		Address: 12 W. Kidder		Phone: 774-1052		Permit Issued: AUG - 2 2000		
Past Use: Single family		Proposed Use: same		COST OF WORK: \$ 1000.00			PERMIT FEE: \$ 30.00	
Proposed Project Description: Outside fireplace		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		<input type="checkbox"/> Approved <input type="checkbox"/> Denied FIRE DEPT.			INSPECTION: Use Group: <u>4</u> Type: <u>B0CA99</u>	
				Action: Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/>		Signature: _____ Date: _____ Signature: <i>[Signature]</i>		
Permit Taken By: Kathy		Date Applied For: July 31, 2000						

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 CALL ROBERT & CHRISTINE WHEN READY @ 772-9748

**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

August 1, 2000

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

Zone: <u>B-3</u>	CBL: 171 A043
Zoning/Approval: <i>[Signature]</i> 8/1/00	
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"/>	

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 ISSUED
WITH REQUIREMENTS**

CEO DISTRICT 2