City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: Portland, ME 937 Washington Avenue Leigh & Donald Roak 772-6643 990653 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: ABC Pool Center 1975 Lisbon St., Lewiston, ME 207-777-1344 COST OF WORK: Proposed Use: PERMIT FEE: Past Use: \$ 5,094.18 \$ 45.00 1-Family Same **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: **U**,Type: BOCA-90 **CBL**:_{171-A-004} Signature: Zoning Approvat: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved 27' Round above ground pool (54" tall) with pool entry Approved with Conditions: □ Shoreland Denied system. □ Wetland ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan mai ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: SP June 21, 1999 **Zoning Appeal** This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 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.. □ Approved □ Denied PERMIT ISSUED Historic Preservation WITH REQUIREMENTS Not in District or Landmark ☐ Does Not Require Review ****Call for Pick Up 772-6643 ☐ Requires Review Leigh & Donald Action: **CERTIFICATION** ☐ Appoved ☐ 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 6-21-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: CEO DISTRICT