

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

Location of Construction: 12 Wayne Street		Owner: Kate Doherty		Phone: Not Given		Permit No: 000185 PERMIT ISSUED MAR 16 CITY OF PORTLAND Zone: R-3 CBL: 177-I-016 Zoning Approval: <i>OK 3/16/00</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>All setbacks shall be measured from property lot lines.</i> <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"/>			
Owner Address: SAA		Lessee/Buyer's Name: N/A		Phone: N/A			Business Name: N/A		
Contractor Name: **Don Anderson		Address: A & A Carpentry 95 Smith St. South Ptlad, ME 04106 799-3749			Phone: 799-3749		INSPECTION: Use Group: R-3 Type: 53 BOCA 99		
Past Use: 1-Family		Proposed Use: Same		COST OF WORK: \$ 2,000			PERMIT FEE: \$ 36.00		
Proposed Project Description: Building handicap ramp.		Signature: <i>[Signature]</i>		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Signature: <i>[Signature]</i>		Date: _____	
Permit Taken By: UB		Date Applied For: 3-9-00							

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 send to:**

Don Anderson
A & A Carpentry
95 Smith Street
South Portland, Maine 04106

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

3-9-00

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PERMIT ISSUED WITH REQUIREMENTS