Location of Construction: 109 Wayside St.	Owner: *** Craig C. Wright		Phone: *** 773-4348		Permit No:
Owner Address:	Lessee/Buyer's Name:	Phone:			001111
109 Wayside St.					
Contractor Name:	Address:	Phone:			Permit Issued:
Owner		GOOT OF WORL	<u></u>		
Past Use:	Proposed Use:	COST OF WORK	X:	PERMIT FEE:	SEP 2 9 20
		\$8,000.00		\$72.00	
		FIRE DEPT.	Approved enied	INSPECTION:	N.C.
			ented	Use Group: Type:	Zone: CRL:
		Signature:		Signature:	A-3 182-B-004
Proposed Project Description:			CTIVITIE	ES DISTRICT (P.A.D.	Zoning Approval:
			Approved	x	Special Zone or Reviews:
Add two car garage		• •		□ □ Shoreland	
		I	Denied		□ □ Wetland
				_	
		Signature:		Date:	□ Subdivision □ Site Plan maj □minor □mm □
Permit Taken By: Gayle	Date Applied For: So	eptember 28, 2000) GG		
					Zoning Appeal
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.					Miscellaneous Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-					
tion may invalidate a building permit and stop all work.					
	-			<i>a</i>	Denied
			٢	PERMIT ISSUED TH REQUIREMENTS	Historic Preservation Not in District or Landmark Does Not Require Review Requires Review
			W	Un.	Action:
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 applicati					
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	e hour to enforce the provisions of the co	de(s) applicable to such	permit		
		a . 1 . 00 . 00			Date. DERMIT ISSUED WITH REDUIREMENTS
SIGNATURE OF APPLICANT	ADDRESS:	September 28, 20 DATE:		PHONE:	
SIGNALUKE OF AFTLICANT		DAIL.		HUND.	WITH KEY-
RESPONSIBLE PERSON IN CHARGE OF W	ORK, TITLE			PHONE:	CEO DISTRICT
White	–Permit Desk Green–Assessor's Ca	nary-D.P.W. Pink-Pul	olic File	Ivory Card-Inspector	

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

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