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: ****8 Columbia Terr. ***** Carol Raymond 772-2066 000958 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: PO Box 782 Raugeley ME Glenn RAymond AUG 3 1 2000 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 2,000 \$ 36.00 FIRE DEPT. □ Approved INSPECTION: single family same Use Group 9-3 Type 5.9 ☐ Denied CBL: BOCAGG Zone: 184-B-015 Signature: Signature: Zonina Approva Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Rev Replacing roofs on existing rear deck and front porch Approved with Conditions: ☐ Shoreland Denied □Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Aug. 21 2000 K K Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ 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 ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation PERMIT ISSUED Mot in District or Landmark WITH REQUIREMENT □ Does Not Require Review ☐ Requires Review Action: CERTIFICATION ☐ 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 □ Approved with Conditions □ 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 ADDRESS: PHONE:

SIGNATURE OF APPLICANT

ADDRESS:

Agu 21 2000

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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

WENTERLIEF 3

CEO DISTRICT

3