389 Congress Street		O			6	01-0549	2 5 21)UI	187 EC	023001	
Location of Construction:					Owner	r Address	וב הסחד		Phone:		
96 Frances St					96 France Typ QFan P, QRTLIAND 207-775-1650						
		Contractor Name			Contractor Address:				Phone		
			rouin Enterprises Inc.			184 North Gorham Rd. Gorham			2078925091		
Lessee/Buyer's Name Phone: n/a n/a		Phone: n/a			Permit Type: Building Miscellaneous					Zone: R-3	
		Proposed Use:			Permit Fee: Cost of Work:			k:			
Single Family			Same: Construct 22' Dormer at Back of House. Call David at 892- 5091 when ready.			\$108.00 \$14,000.00			3	5,76	
		THE SECRET IS OF DESCRIPTION				* 10.700 PS EV NO * 15 CO. II			CTION:		
	5091 when rea	Denicd Use				roup: 12-3	Туре: 5 В				
						SANTIMES!	BAC-				
				- I#			MAG	THE REQUIREMENTS			
Proposed Project Description: Construct a 22' Dormer at Back of House.					Signatura				DI ITM		
Construct a 22 Domi	. of House.		Signature: PEDESTRIAN ACTIVITIES DI			VITIES DIST	TRICT (P.A.D.)				
						Action: Approved Approved w/Conditions Denied					
								noved w			
D			_		Signature:				Date:		
Permit Taken By: cih		Date Applied For: 05/17/2001	Zoning ripprovar								
-		Special Zone or Reviews Shoreland		ews	ws Zoning Appeal		T	Historic Preservation			
	es not preclude the applicable State and				☐ Variance			Not in District or Landmark			
2. Building permits do not include plumbing, septic or electrical work.			Wetland			Miscellaneous			Does Not Require Review		
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			☐ Flood Zone to Central Subdivision Game		mi ~ls	Conditional Use			Requires Review		
					ly	Interpretation			Approved		
			☐ Si	te Plan	,	Approve	ed		Approved w	/Conditions	
			Maj Minor MM		Denied				Denied		
E				Date:		Date:			Date:		
5/24/01									• /	·	
									ERMIT ISSU H REQUIRE		
			(CERTIFICATI	ON				¥		
I have been authorized jurisdiction. In addition	by the ow on, if a per	ner of record of the na vner to make this appli mit for work described all areas covered by su	cation a	as his authorize application is i	d agent ssued,	t and I agree I certify that	to conform the code off	to all a	pplicable laws authorized rep	of this resentative	
SIGNATURE OF APPLICANT			ADDRESS			DATE			PHONE		
RESPONSIBLE DED SON	IN CHARCE	E OE WORK TITLE			_		Dime	_	- DVI	ONE	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE							DATE		PHO	JNE	

DATE

PHONE