## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: Owner: Permit No: Larry & Kris Torrev 42 Caleb St 879-2287 08115 4 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 42 Caleb St Ptld 04102 Contractor Name: Phone: Address: Norm Gagne, Gorham ME COST OF WORK: PERMIT FEE: Proposed Use: Past Use: 9 1032 27,000 155.00 1-Family Dwelling Same w/Addition FIRE DEPT. Approved INSPECTION: Use Group \$3 Type:55 ☐ Denied BOCAG Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT ( Action: Approved Approved with Conditions: ☐ Shoreland 24'X 16' Addition Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐miper ☐mmî☐ Permit Taken By: Date Applied For: toleman SP October 2, 1998 Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous 2. 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 ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation ☑Not in District or Landmark ☐ 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit October 2, 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: Larry Torrey

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

PHONE:

**CEO DISTRICT** 

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE