## 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: Tran, Wayne D. 761-2586 48 Willow Ln Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: SEP 2 9 1998 SAA Proposed Use: COST OF WORK: PERMIT FEE: Past Use: \$ 600.00 25.00 CITY OF PORTLAN INSPECTION: **FIRE DEPT.** □ Approved 1-fam Same Use Group: **U** Type: **5B** ☐ Denied BOCA 96 **Pou** 1191-B-040 Signature: Signature: Zoning /Approva Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (J Action: Approved Special Zone or Rev Approved with Conditions: □ Shoreland Construct shed (12 x 12) Denied □ Wetland ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: SP 21 Sept 98 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ 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-3. ☐ 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 ☐ Approved with Conditions 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 ☐ 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 22 Sept 98 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CEO DISTRICT

PHONE: