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

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Location of Construction: **10 Rabbit Run 04103	Owner: Richard & Claire	Clonan	Phone: 828-9586	Permit No: 99031_0
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name: Alan J. Munroe	Address: 635 Long Hill Road Se			Permit Issued:
Past Use:	Proposed Use:	COST OF WORK: \$ 2,000	<b>PERMIT FEE:</b> \$ 30,000	TOWN I Z ISSUE
Single Family	Same	FIRE DEPT.   Ap	proved INSPECTION:	CITY OF PORTLAND
		Signature:	BOCA 96 Signature: Holfe	20ne: CBL: 195-C-010
Proposed Project Description:			FIVITIES DISTRICT (PAD	
Build 14 x 14 Deck attached to rear of house.  Approved with Conditions:			□ Special Zone or Reviews: □ □ Shoreland □ □ Wetland □ □ Flood Zone	
		Signature:	Date:	□ Subdivision
Permit Taken By:	Date Applied For:	-5-99		☐ Site Plan maj ☐minor ☐mm ☐
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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.</li> </ol>				□ Variance □ Miscellaneous □ Conditional Use □ Interpretation □ Approved □ Denied
			DEDa suo	Historic Preservation  Not in District or Landmark  Does Not Require Review  Requires Review
			PERMIT ISSUED WITH REQUIREMENTS	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 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				tion, Denied
		4-5-99		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WOL	RK, TITLE		PHONE:	CEO DISTRICT 3
White-F	ermit Desk Green-Assessor's C	anary-D.P.W. Pink-Publ	ic File Ivory Card–Inspector	.