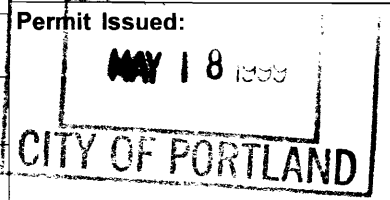


City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: *55 Old Mast Rd. Portland 04102		Owner: * Richard R. & Ellen J. Farnsworth	Phone: (207) 874-6399	Permit No: 990486
Owner Address: 55 Old Mast Rd. Portland		Lessee/Buyer's Name:	Phone:	BusinessName:
Contractor Name: Landmark Builders		Address: 1905 Congress St. Portland 04102		Phone: (207)
Past Use: Single Family		Proposed Use: Same	COST OF WORK: \$ 2,700.00	PERMIT FEE: \$ 35.00
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group <i>93</i> Type <i>5A</i> <i>BOCA 96</i> Signature: <i>[Signature]</i>	
Proposed Project Description: Remodel Kitchen W/ Expansion		Signature: _____ Date: _____		Zone: <i>B-2</i> CBL: 213A014
Permit Taken By: S.P.		Date Applied For: May 12th, 1999		



Zoning Approval: *OK US 5/17/99*
Special Zone or Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
 Date: *[Signature]*

PERMIT ISSUED WITH REQUIREMENTS

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

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: May 12th, 1999 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____