y of Portland, Maine - Bui	lding or Use Permit Application	389 Congress	Street, (04101, Tel: (207)	874-8703, FAX: 874-8716
tion of Construction:	Owner:		Phone:		Permit No: 9 8 0 7 1 7
48 Penrith Rd	Richard & Joy			772-9067	
ner Address: SAA 04102	Lessee/Buyet's Name:	Phone:	Busines	sName:	PERMIT ISSUED
ntractor Name:	Address:	Phon	e:		Permit Issued:
Maine Window & siding	62 Portland Rd Kennebu				JUL - 2 1998
st Use:	Proposed Use:	COST OF WORK: \$ 14,200.00 FIRE DEPT. □ Approved □ Denied		PERMIT FEE: \$ 90.00 INSPECTION: U, Use Group: Type: 130CA-96_///	
					CITY OF PORTLAND
					Zone: CBL: 219-A_027
		Signature:		Signature: Holpe	219-A_027
roposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (V.A.D.)					Zoning Approval:
replacement of 14' x 24' o 2 second 8' x 11'	Action: Approved Approved with Conditions: Denied		Special Zone or Reviews.		
		Signature:		Date:	☐ Flood Zone ☐ Subdivision
Permit Taken By: VD	Date Applied For:	26 June 1998		Date.	☐ Site Plan maj ☐minor ☐mm [
Building permits do not include plumbing, septic or electrical work. 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					☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied
			WIT	PERMIT ISSUED H REQUIREMENTS	Historic Preservation Not in District or Landmark Does Not Require Review Requires Review Action:
	CERTIFICATION			11/5	
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					been ☐ Approved with Conditions ☐ Denied
1	hable hour to enforce the provisions of the code(,	Date:
SIGNATURE OF APPLICANT	ADDRESS:	June 1998 DATE:		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF	WORK TITLE			PHONE:	
					CEO DISTRICT
Wi	hite-Permit Desk Green-Assessor's Cana	ry-D.P.W. Pink-P	ublic File	Ivory Card-Inspector	