

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Address/Location of Construction:	349 Capisic St.	
Total Square Footage of Proposed Stru		
Tax Assessor's Chart, Block & Lot	862 Applicant Name: RAS	Telephone:
Chart# Block# Lot#		
	Address Po Box 1538	207 892 7473
	City State & 7in 11.11	Email:
	City, State & Zip Windham, ME 0406Z	ricks e sonborn companies.
Lessee/Owner Name: if different than applicant) Dutter Hill Property	Contractor Name: RAS	Cost Of Work: \$26,000
Address:	Address: PO Box 1538	
POBOX 1538		C of O Fee: \$
City, State & Zip:	City, State & Zip: Wordham, ME	II:
Windham, ME 04062	0,002	Historic Rev \$
Telephone & E-mail:	Telephone & E-mail:	Total Fees : \$ 220.00
ricks@ Scaborn componies.com	(207)(892-7473)	
Current use (i.e. single family) If vacant, what was the previous use? Proposed Specific use:	Single family	
If vacant, what was the previous use?	Single family	
Proposed Specific use:	Single family	
Is property part of a subdivision? <u>No.</u> If y	ves, please name	
Project description:		
To Remove existing roof	structure and rebuild a s	altbox" roof
Who should we contact when the permit is	ready: Rick Sanhara	
Address: fo Box 1538		
City, State & Zip: Windham, M.	E 04062	
E-mail Address: MICKS @ SAND	orn companies.com	90.
Telephone: 207 892 14		
Please submit all of the information	n outlined on the applicable checkli	st. Failure to do so

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature:	Am Lity	FOR Rick Senborn Date:	12/12/13	
7				