## 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: Permit No: 9 Meadowbrook Lane \*\*\*\*\* Gary & Barbara Carroll \*\*\*\* 774-9504 Lessee/Buyer's Name: Owner Address: BusinessName: Phone: SAA Address: Phone: Contractor Name: Sebago Pools COST OF WORK: Proposed Use: PERMIT FEE: Past Use: \$ 60<u>.00</u> 5,168.17 FIRE DEPT. Approved Single family INSPECTION: same ☐ Denied Use Group: *U* Type: BOCA99 Signature: Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (#A.D.) Action: Approved Special Zone or Reviews 15'30 above-ground pool Approved with Conditions: ☐ Shoreland Denied $\Box$ □Wetland ☐ Flood Zone Date: □ Subdivision Signature: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: Kathy 6/12/00 **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 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Please mail to: Gary & Barbara Carroll Historic Preservation 9 Meadowbrook Lane **™**Not in District or Landmark Portland, ME 04103 ☐ Does Not Require Review □ Requires Review PERMIT ISSUED WITH REQUIREMENTS Action: CERTIFICATION ☐ Appoved 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 ☐ Approved with Conditions □ 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 6/12/00 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: PERMIT ISSUED

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

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WITH REQUIREMENTS

PHONE: