## 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: 774-9485 Matthew & Catherine Campbell 86 Patridge Circle 000732 Lessee/Buver's Name: BusinessName: Owner Address: Phone: same Permit Issued: Phone: \*\*\*(H) 776-4635 (o) 781-5569 Contractor Name: 12 Madokawando Ldg. Falmouth Ben Weigel COST OF WORK: PERMIT FEE: Proposed Use: Past Use: JUL - 7 2000 \$ 54.00 4500.00 INSPECTION: FIRE DEPT. □ Approved same Single family Use Group: 9.3 Type: 5/3 ☐ Denied Zone CBL: BOC 499 228A-A-008 Signature: Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (2) Action: Approved Approved with Conditions: □ Shoreland Enlarge existing deck Denied □ Wetland ☐ Flood Zone □ Subdivision area > Signature: Date: Date Applied For: July 3, 2000 ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Gayle Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation Please call when ready ☐ Not in District or Landmark ☐ Does Not Require Review PERMIT ISSUED □ Requires Review WITH REQUIREMENTS Action: CERTIFICATION □Appoved ☐ Approved with Conditions 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 □ 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 ADDRESS: PHONE: SIGNATURE OF APPLICANT PERMIT ISSUED <u>WIT</u>H REQUIREMEN**TS** RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**