## 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:
3 Blueberry Rd ****** Mark Mason		729-4164		164.	
Owner Address:	Lessee/Buyer's Name:	Phone: BusinessName:		sName:	001137
*** 257 Bath Rd Brunswick ME					
Contractor Name:	Address:	Phone			Permit Issued:
Monaghan Woodworking		y.			EMENTE !
Past Use:	Proposed Use:	COST OF WORK	<b>(:</b>	<b>PERMIT FEE:</b> \$ 30.00	
Vetenary hospital	same	FIRE DEPT.   D  Signature:	Approved enied	INSPECTION: Use Group: B Type: 5/2 BOCA 99 Signature: Allen	Zone: CBL: 237-B-011
Proposed Project Description:			CTIVITIE	ES DISTRICT (P.A.D.)	Zoning Approval:
amend permit 000722 to chang	Action: Approved		□ Special Zone or Reviewst □ Shoreland □ Wetland □ Flood Zone □ Subdivision		
Permit Taken By: K	Date Applied For:				☐ Site Plan maj ☐minor,☐mm ☐
Termit Taken 2).	Oct 5 2000 K				Zoning Appear
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol> PERMIT ISSUED         WITH REQUIREMENTS					☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied  Historic Preservation ☐ Whot in District or Landmark ☐ Does Not Require Review ☐ Requires Review
			WITH F	REQUIREMENTS	Action:
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					□ Denied   / /
		Oct 5 2000			' /
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	PEDMIT IXLIED
RESPONSIBLE PERSON IN CHARGE OF WO	ORK, TITLE			PHONE:	CEO DISTRICT
White-	-Permit Desk Green-Assessor's Canar	v-D.P.W. Pink-Pul	olic File	lvory Card-Inspector	