

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 01-0455	Issue Date: MAY - 9 2001	City of Portland	City of Portland
		Permit Issued	Permit Issued
		277 J011001	277 J011001

Location of Construction: 26 Glen Haven East Rd	Owner Name: Koch Georgia L	Owner Address: 26 Glenhaven East Portland, Me. 0410	Phone: 207-773-2209
Business Name: n/a	Contractor Name: Liston, John	Contractor Address: 90 Sabbady Point Road Windham	Phone: 2078923972
Lessee/Buyer's Name n/a	Phone:	Permit Type: Additions - Dwellings	Zone: R-3

Past Use: single family	Proposed Use: single family	Permit Fee: \$36.00	Cost of Work: \$2,000.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: 5B PERMIT ISSUED WITH REQUIREMENTS	

Proposed Project Description:
erect a 4' 6" x 10' mud room

Signature: _____ Date: _____

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.):

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: jodinea	Date Applied For: 05/01/2001	Zoning Approval	
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>05/01/01</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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PERMIT ISSUED WITH REQUIREMENTS

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

5/20 Pre Con with Owner,
Schaetz OK. Call when
Sono Tube holes Day 20

Did Close in wrap
Elec of Framing OK