## 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:828-5981 work	Permit No:
20 Ludlow Terrace 04102	**Bethany M. Will		775-0045 home	900
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	<u> </u>
				Permit lèsued:
Contractor Name: CMA Carpentry	Address: 35 Depot Street Windham, ME04062 893-2344			i chine iosucu.
Past Use:	Proposed Use:	COST OF WORK		MAY 2 1 1999
		\$ 2,500	<b>\$</b> 35.00	
1-Family	Same	FIRE DEPT. 🗆 A	Approved INSPECTION: 4	
2			Denied Use Group 4, 7 Type:	B
		× ×	1 DOC 496_1 M	Zone: 2 CBL: 286-A-022
Proposed Project Description:		Signature:	Signature: Auffor	
Proposed Project Description.			CTIVITIES DISTRICT (A.d.)	5/20/94
			Approved UV	Special Zone or Reviews:
Build a 16 x 20 deck.		Approved with Conditions: Denied	□ □ Shoreland	
			Semed	U   D Wetland   D Flood Zone
		Signature:	Date:	
Permit Taken By: UB	Date Applied For:	5-17-99		🗆 Site Plan maj 🗆 minor 🗆 mm 🗆
		5-17-99		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
	•••			☐ 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- tion may invalidate a building permit and stop all work				□ Interpretation □ Approved
tion may invaluate a building permit a				
				Historic Preservation
			PERMIT ISSUED	Does Not Require Review
			WITH REQUIREMENTS	□ Requires Review
				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 applica				
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				all Date:
areas covered by such permit at any reasona	ble hour to enforce the provisions of the	code(s) applicable to such	permit	
		5-17-99		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
<b>RESPONSIBLE PERSON IN CHARGE OF</b>	WORK, TITLE		PHONE:	
Whi	te–Permit Desk Green–Assessor's (	Canary–D.P.W. Pink–Pul	blic File Ivory Card-Inspector	

White–Permit Desk Green–Assessor's Canary–D.P.W. Pink–Public File Ivory Card–Inspector