

Location of Construction: 89 Maggie Lane		Owner: W.A. One		Phone: 650-6989 773-4988		Permit No: 000766	
Owner Address: Po Box 10127 portland, ME		Lessee/Buyer's Name: N/A		Phone: N/A		Business Name: N/A	
Contractor Name: Custom Built Homes		Address: Windham, ME		Phone: 892-3149		Permit Issued: JUL 13 2000	
Past Use: Two-Family		Proposed Use: Same		COST OF WORK: \$0		PERMIT FEE: \$30.00	
Proposed Project Description:  ( around foundation Permit # 000459) alter foundation		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: A3 Type: 2 BOCA 99		CITY OF PORTLAND	
		Signature:		Signature: <i>[Signature]</i>		Zone: CBL: 292-A-035	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: Approved <input type="checkbox"/>		Approved with Conditions: <input type="checkbox"/>		Denied: <input type="checkbox"/>	
		Signature:		Date:		Zoning Approval: 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	
Permit Taken By: GG		Date Applied For: June 20, 2000 GG					

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..

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT	ADDRESS:	DATE: June 20, 2000	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

PERMIT ISSUED WITH REQUIREMENTS  
CEO DISTRICT

COMMENTS

292 A 035  
000 766

	Type	Inspection Record	Date
Foundation:	_____	_____	_____
Framing:	_____	_____	_____
Plumbing:	_____	_____	_____
Final:	_____	_____	_____
Other:	_____	_____	_____