

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

Location of Construction: XXXXXXXX 134 Hicks St		Owner: Michelle & Patricia Kroot		Phone: 878-5234	Permit No: 980571
Owner Address: SAA 04103		Lessee/Buyer's Name:		Phone:	BusinessName:
Contractor Name: Namco		Address:		Phone:	
Past Use: 1-fam		Proposed Use:		COST OF WORK: \$ 1,800.00	PERMIT FEE: \$ 30.00
Proposed Project Description: Install 21' A/G pool		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: <i>Swing 1/27/98</i> Use Group: Type: <i>127</i>	
		Signature: _____		Signature: <i>[Signature]</i>	
Permit Taken By: S.P.		Date Applied For: 01 June 1998		Zoning: <i>R-3</i> CBL: 297-F-011	
		Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Zoning Approval: <i>OK - S 6/2/98</i> 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"/>	

PERMIT ISSUED
Permit Issued:
JUN - 4 1998
CITY OF PORTLAND

PERMIT ISSUED WITH REQUIREMENTS

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..

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: 02 June 1998 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

- Zoning Appeal**
- Variance
 - Miscellaneous
 - Conditional Use
 - Interpretation
 - Approved
 - Denied

- Historic Preservation**
- Not in District or Landmark
 - Does Not Require Review
 - Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
Date: *MS 6/2/98*

CEO DISTRICT 7
K. CARROLL