	y of Portland, Maine		_				rmit No: 03-1386	Issue Dat	e:	CBL:		
	Congress Street, 0410	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		03-1380			297 G00	09001	
	ation of Construction:					Owner Address:				Phone:		
4 King St			Plummer Sheryl C			10 Derby Rd				775-7670		
Bus	iness Name:		Contractor Name:			Contractor Address:					Phone	
			F. S. Plummer Co., INC			80 Pinetree Industrial Pkwy Portland				20782867	2078286711	
Lessee/Buyer's Name Phone:						Permit Type: Garages - Detached					Zone:	
						Gar	ages - Detach	1		T	<u> </u>	
	t Use:		Proposed Use:			Permit Fee:		Cost of Wo				
Sin	gle Family		Single Family	w/detached garage		\$75.00		\$6,0	00.00			
								Approved INSPECTIO Use Group:			_	
										roup:	Type	
						4						
	posed Project Description:		*.1									
Build a 12'x17.5' one story detached garage with storage						ŭ				ignature:		
						PEDESTRIAN ACTIVITIES DISTRIC				T (P.A.D.)		
						Action: Approved Approved Approved				ed w/Condition Denied		
						Signa	nature:			Date:		
Peri	mit Taken By:	Date A	pplied For:				Zoning					
jm	•	11/10					Zomie	; дрргоча	1			
1.	This permit application	does not	1		Special Zone or Reviews		Zoning Appeal			Historic Preservation		
1.	Applicant(s) from meeting applicate Federal Rules.		•	☐ Sì	horeland		☐ Variance			☐ Not in District or Landm		
2.	Building permits do not include plumbing, sep or electrical work.			☐ Wetland			Miscellaneous			☐ Does Not Require Revie		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flood Zon			☐ Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work				Subdivision		☐ Interpretatio			Approved			
				Site Plan			Approved			Approved w/Condition		
				Maj Minor MM			☐ Denied			☐ Denied		
				Date:			Date:			Date:		
I ha juri: shal	reby certify that I am the ve been authorized by the sdiction. In addition, if a Il have the authority to en uch permit.	e owner to permit fo	o make this appli r work described	med procation a	as his authorize application is is	ne prop d agen sued, I	t and I agree certify that t	to conform he code offi	to all ap	oplicable laws of thorized repre	of this sentative	
SIC	SNATURE OF APPLICAN				ADDRES	S		DATE	Ξ	P	НО	

Location of Construction:	Owner Name:		Owner Address:	Phone:							
4 King St Plummer Sheryl C		10 Derby Rd		775-7670							
Business Name:	Contractor Name:		Contractor Address:	Phone							
	F. S. Plummer Co., INC		80 Pinetree Industrial Pk	kwy Portland	207828671	1					
Lessee/Buyer's Name	Phone:		Permit Type:		•	Zone:					
			Garages - Detached								
	1										
Dept: Zoning Status: P	Pending	Reviewer	Jeanine Bourke	Approval Dat	e:						
Note: 11/10/03 Mark P. Did not sho					Ok to Issue	:					
Issues with lot coverage and need rear setback dimension.											
11/26/03 Submitted surveyor		be 4,144 square	feet. Mark P. Will subm	iit an original							
with the placement of the new garage and setbacks. 1) This permit is issued under Section 14-433 which allows a reduction of the rear setback. The accessory garage must meet the											
_ ·				ssory garage mu	st meet the						
required 25' front setback and the	-	•									
2) This permit is being approved on work.	the basis of plans subm	itted. Any devi	ations shall require a sep	arate approval b	efore startin	ig that					
Dept: Building Status: P	Pending	Reviewer	Jeanine Bourke	Approval Dat	e:						
Note: Need to know how the storage	_				Ok to Issue	:					
11/21/03 received plan showing											
		CERTIFICATIO	N								
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit fo shall have the authority to enter all are to such permit.	o make this application a r work described in the a	as his authorized application is iss	agent and I agree to con- ued, I certify that the cod	form to all applice official's autho	cable laws o	of this entative					
SIGNATURE OF APPLICAN		ADDRESS		DATE	PI						

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT