## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: 15 Wirt St Owner: Permit No: Verrill St/Wirt St David Chase 990288 Owner Address: Lessee/Buyer's Name: BusinessName Phone: \*\* 50 Gray St Falmouth ME 04105 Address: Phone: Contractor Name: SAA COST OF WORK: PERMIT FEE: Past Use: Proposed Use: APR 5 1999 \$ 55,000 295.00 1-Family Vacant **FIRE DEPT.** □ Approved INSPECTION: Use Group \$73 Type 5 ☐ Denied BOCA 96 299-D023 Signature: Signature: / Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Construct single family dwelling Approved with Conditions: □Shoreland Denied □ Wetland ☐ Flood Zone # □ Subdivision Signature: Date: Site Plan mai □minor □ Date Applied For: Permit Taken By: March 15, 1999 **Zoning Appeal** This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use ☐ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work.. □ Denied **Historic Preservation** Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: CERTIFICATION □ Appoved 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 □ Approved with Conditions □ Denied 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 March 15, 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: 1

PHONE:

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE