## 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: Permit No: 🔾 🔾 🎧 27 Verrill St Lot 13 David Chase 797-9093 Owner Address: Lessee/Buver's Name: Phone: BusinessName: Permit Issued: Contractor Name: Address: Phone: 1 1 1999 \*\* Keith Alling 66 High Cliff Rd Windham ME 04062 892-1148 COST OF WORK: Past Use: Proposed Use: PERMIT FEE: 60,000 320 CITY OF PURILAR Vacant 1-Fam **FIRE DEPT.** □ Approved INSPECTION: Use Group: R-3Type: 5 B ☐ Denied Zone: CBL: BOCA 96 299-D-034 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P/A.D.) Action: Approved Construct 1-family dwellign w/attached garage Approved with Conditions: ☐ Shoreland-Denied ☐ Wetland □ Flood Zone Zov Signature: ☐ Subdivision Date: Site Plan mai □minor□mm 🏖 Date Applied For: Permit Taken By: SP February 19, 1999 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 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-□ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation Divided in District or Landmark ☐ Does Not Require Review □ Requires Review Action: **CERTIFICATION** ☐ Appoved ☐ Approved with Conditions 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 □ 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 February 19, 1999 SIGNATURE OF APPLICANT ADDRESS: PHONE: DATE:

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CEO DISTRICT

PHONE: