

Location of Construction: 380 WARREN AVE		Owner: ARTHUR GIRARD		Phone:		Permit No:  1-1322
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		
Contractor Name: ***DICK CONNOLLY DEAD RIVER CO. ***		Address: 883-9515		Phone:		Permit Issued:  NOV 22 1
Past Use:  REPAIR FACILITY		Proposed Use:  SAME		COST OF WORK: \$		
				PERMIT FEE: \$ 30.00		Zone: <input checked="" type="checkbox"/> CBL: B-4 303-E-001 Zoning Approval: <i>OK</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"/>
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>[Signature]</i>		
Proposed Project Description:  1 100 GAL. PROPANE TANK ABOVE GROUND				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		<div style="border: 1px solid black; padding: 5px;"> <b>Zoning Appeal</b>  <input type="checkbox"/> Variance  <input type="checkbox"/> Miscellaneous  <input type="checkbox"/> Conditional Use  <input type="checkbox"/> Interpretation  <input type="checkbox"/> Approved  <input type="checkbox"/> Denied    <b>Historic Preservation</b>  <input checked="" type="checkbox"/> Not in District or Landmark  <input type="checkbox"/> Does Not Require Review  <input type="checkbox"/> Requires Review    <b>Action:</b>  <input type="checkbox"/> Approved  <input type="checkbox"/> Approved with Conditions  <input type="checkbox"/> Denied    <b>Date:</b> <i>[Signature]</i> </div>
Permit Taken By: K		Date Applied For: NOV 20 2000				

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

NOV 20 2000 K

SIGNATURE OF APPLICANT ADDRESS: DATE: 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

PERMIT ISSUED  
WITH REQUIREMENTS

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