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: ** 797-6459***	Permit No. 0 5 0 0
60 Aldworth Street Owner Address:	** Kay Curtis Lessee/Buyer's Name:	Phone:	BusinessName:	
SAA				·
Contractor Name:	Address: Phone: 831-8555		Permit Issued:	
Merrit pools	D III	COST OF WORK		JUL 2 0 2000
Past Use:	Proposed Use:	\$2,000	PERMIT FEE \$ 36.00	2 0 2000
		FIRE DEPT. □ A	pproved INSPECTION	· · · · · · · · · · · · · · · · · · ·
single family	same	□ D ₀	1 1	Type:
		Signature:	BOCAGG Signature: A	Zone: CBL: 329-D-048
Proposed Project Description:			CTIVITIES DISTRICT	
		Action: Approved		Special Zone or Reviews:
above ground pool 24'		1		☐ ☐ Shoreland
		D	enied	□ □ Wetland
		Signature:	Date:	☐ Flood Zone ☐ Subdivision
Permit Taken By:	Date Applied For:		Date.	☐ Site Plan maj ☐minor ☐mm ☐
K K		uly 17 2000 K		Zoning Appeal
1. This permit application does not pred	clude the Applicant(s) from meeting applicable S	tate and Federal rules.		Zoning Appeal □ Variance
2. Building permits do not include plumbing, septic or electrical work.				☐ Miscellaneous
				☐ Conditional Use☐ Interpretation
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				☐ Approved
tion may in another a canoning permi	and stop an worth			□ Denied
				Historic Preservation
				☐Not in District or Landmark
		••		□ Does Not Require Review
			DEDMIT ISSUED	☐ Requires Review
			PERMIT ISSUED WITH REQUIREMENT	S Action:
	CERTIFICATION		WILL VEGOTIETIE	
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				have been
	olication as his authorized agent and I agree to co	•		
	ication is issued, I certify that the code official's			o enter all
areas covered by such permit at any reas	onable hour to enforce the provisions of the cod	e(s) applicable to such p	permit	Date:
		17		
		July 24 2000		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	·
				PERMIT ISSUED
RESPONSIBLE PERSON IN CHARGE (OF WORK, TITLE		PHONE:	MENTS *

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