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: Lot 2 Tucker Ave Lvdon/Vose ***** 799**-**5495 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Permit Issued: Phone: Contractor Name: Address: Lvdon Construction 183 Mitchell Rd Cape Elizabeth COST OF WORK: PERMIT FEE: Proposed Use: Past Use: \$70,000 \$ 444,00 Vacant single family **FIRE DEPT.** □ Approved INSPECTION: Use Group: R3Type: 5/2 □ Denied **CBL:** 332-B-010 BOCA 98 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Review Approved with Conditions: New single family ☐ Shoreland 4 Denied □Wetland ☐ Flood Zone PA □ Subdivision Signature: Date: X Site Plan mai ⊟minor⊟mm. A Date Applied For: Permit Taken By: MN March 27 2000 K # 7-00 000 44 **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. 2. □ 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 Mot in District or Landmark Does Not Require Review □ Requires Review Action: PERMIT ISSUED 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit March 27 2000 DATE: PHONE: SIGNATURE OF APPLICANT ADDRESS: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: CEO DISTRICT S 1

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