Location of Construction: Phone: $781-2260 \times 424$ (w) Permit No: Owner: a c ** Shawn L. Gaudreau 25 Dover Avenue 797-4930 (h) 9 **Owner** Address: Lessee/Buyer's Name: Phone: BusinessName: 54 Constitution Drive, Westbrook, ME 04092 N/A N/A Permit Issued: Phone: Address: Contractor Name: SAA SAA Owner **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: \$ 19,000 \$ 144.00 Vacant INSPECTION: Foundation **FIRE DEPT.** \Box Approved □ Denied Use Group: Type: Excavation & Foundation CBL: Zone: BOCA96 Work Only 332-F-001 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (D.A.D.) Action: Approved Special Zone Excavation & Foundation Work Only Approved with Conditions: □ Shoreland Denied □ Wetland Will obtain permit in future for any additional work. Flood Zone 70ne C Needs SITE Plan review -□ Subdivision Signature: Date: 🐙 Site Plan maj, 🗆 minor 🖾 mm Date Applied For: Permit Taken By: 11-1-99 1999015 MW Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. □ Approved tion may invalidate a building permit and stop all work. Denied **/*Call for Pick Up. Shawn Gaudreau 781-2260 x 424 (w) Historic Preservation ZNot in District or Landmark 797-4930 (h) Does Not Require Review □ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS **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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 11-1-99 ADDRESS: DATE: PHONE: SIGNATURE OF APPLICANT PERMIT ISSUED WITH REOUIREMENTS **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT** ub White–Permit Desk Green–Assessor's Canary–D.P.W. Pink–Public File Ivory Card–Inspector

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716