

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

Location of Construction: Milton Street Lot 164		Owner: Diversified Properties		Phone: 773-4988		Permit No: 000451
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		
Contractor Name: *** Custom Built Homes		Address: *** 27 Main Street Windham ME		Phone:		Permit Issued: MAY 9
Past Use: Vacant		Proposed Use: Single family		COST OF WORK: \$70,000		
				PERMIT FEE: \$ 444.00		
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		
				INSPECTION: Use Group: R-3 Type: 53 BOC 499		
Proposed Project Description: New single family				Signature: _____		
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		
				Signature: _____ Date: _____		
Permit Taken By: K		Date Applied For: April 20 2000 K				

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

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: **April 20 2000** 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**

Zone: R-2	CBL: 333-G-008
Zoning Approval: of with conditions	
Special Zone of Reviews:	
<input type="checkbox"/> Shoreland	
<input type="checkbox"/> Wetland	
<input type="checkbox"/> Flood Zone	
<input type="checkbox"/> Subdivision	
<input checked="" type="checkbox"/> Site Plan major	
<input type="checkbox"/> minor	
<input type="checkbox"/> mm	
# 2000008	
Zoning Appeal	
<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	

Historic Preservation

- ☒ Not in District or Landmark
☐ Does Not Require Review
☐ Requires Review

Action:

- ☐ Approved
☐ Approved with Conditions
☐ Denied

Date: _____

**PERMIT ISSUED
WITH REQUIREMENTS
CND DISTRICT**