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: 99 149 Beverly Street Robert Hunnewell 797-7543 Lessee/Buyer's Name: Owner Address: BusinessName: Phone: Permit Issued: Contractor Name: Address: Phone: * Brent Cyr, Chase Custom Homes 1 Percy Hawks Road, Windham, ME 04062 892-2700 JAN 1 2 1999 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 12,000 \$ 80.00 CITY OF PORTLAND **FIRE DEPT.** □ Approved INSPECTION: 1 Family Same ☐ Denied Use Group: Type: CBL:333-K-010 BOCA 96 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Garage addition with storage area above. Approved with Conditions: ☐ Shoreland >> Denied □ Wetland 18 Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐m Permit Taken By: ub Date Applied For: 12/28/98 □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation ☑ Not in District or Landmark □ Does Not Require Review □ Requires Review Action: 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 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, □ Denied 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 1/4/99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT