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: Bruce & Deborah Johnson 104 Saugus Street 207-797-0030 991317 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: N/A N/A SAA N/A Permit Issued: Contractor Name: Address: Phone: **John J. Lewis 52 Brown Cove Road, Windham, ME 04062 892-1522 x310 UL-Past Use: Proposed Use: COST OF WORK: PERMIT FEE: \$ 114.00 \$ 15,000 1-Family Same **FIRE DEPT.** □ Approved INSPECTION: Use Group: 83 Type: 53 ☐ Denied CBL:336-L-026 130CA96 Zone-Signature: Signature: Proposed Project Description: Zoning Approva PEDESTRIAN ACTIVITIES DISTRICT (**P**.**A**.**D**.) Action: Approved Attached garage to 1 family ranch style home. Approved with Conditions: ☐ Shoreland Denied □Wetland ☐ Flood Zone Signature: □ Subdivision Date: Permit Taken By: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: ub 11-18-99 **Zoning Appeal** This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance 1. ☐ 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.. ***Please Send To: John J. Lewis ☐ Denied 52 Brown Cove Rd. Windham, Maine 04062 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 □ 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 11-19-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: WITH REQUIREMENTS RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT** 1 ub White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector