

Location of Construction: 165 Lexington Ave. [159-167] 04103		Owner: Frank & Shirely Cofran		Phone: 797-6671		Permit # 991116	
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: **Sunrise Home Incorporated		Address: 211 Holm Ave. Portland, ME		Phone: 774-8908		Permit Issued: OCT 12 1999	
Past Use: 1-Family		Proposed Use: Same		COST OF WORK: \$ 47,000		PERMIT FEE: \$ 306,00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
				Signature:		Signature:	
Proposed Project Description: Addition				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>			
Permit Taken By: NW				Date Applied For: 9-28-99			
				Signature: _____ Date: _____			

Zone: **R-3** CBL: 338-B-020
 Zoning Approval: *OK - to remain 1 fam*
Special Zone or Reviews:
 Shoreland *10/8/99*
 Wetland *See conditions*
 Flood Zone
 Subdivision
 Site Plan maj minor mm

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..

***Send To: Sunrise Home Incorporated
 211 Holm Ave.
 Portland, ME

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

**PERMIT ISSUED
WITH REQUIREMENTS**

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: **9-29-99** PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

CEO DISTRICT 1
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