Location of Construction: ** 19 Farragut St. 04103 William & Gail		il Bowden	Bowden Phone: 797-		Permit No:
Owner Address:	Lessee/Buyer's Name:	Phone:	Phone: BusinessName:		000591
19 Farragut St.					
Contractor Name:	Address:	Phone			Permit Issued:
Sebago Lake Pool			856-10		JAN 2 2000 I
Past Use:	Proposed Use:	COST OF WORK		PERMIT FEE:	
		\$ 2831.25	_	\$ 60.00	
	pool	pool FIRE DEPT. Approved INSPECTIO		INSPECTION:	CITY OF PORTLAND
			enied	Use Group: 🖌 Type: 🕯	
				BOCA99 IN	Zone: CBL : 339-K-001
		Signature:		Signature: Aff set	Zaning Annaguali
Proposed Project Description:	PEDESTRIAN A	CTIVITIE	S DISTRICT (PA.D.)	1 1) in conduces	
			approved	Ŵ	Special Zone or Reviews:
				ith Conditions:	
above ground pool		L	Denied		$\Box \Box Wetland \supset C [9]$
-		C'anatana			
		Signature:		Date:	□ Subdivision □ Site Plan maj □minor □mm □
Permit Taken By: KA	Date Applied For:	ay 30, 2000	$_{ m JF}$		
		<u> </u>			Zoning Appeal
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.					
					□ Conditional Use □ Interpretation
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa- tion may invalidate a building permit and stop all work					
tion may invaluate a building permit and s	top an work.				□ Denied
above ground pool PERMIT ISSUED WITH REQUIREMENTS					Historic Preservation
					☑Not in District or Landmark □Does Not Require Review
					1
		<i>,</i>	WITH RI	LUNINLINL	Action:
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					
					Date:
SIGNATURE OF APPLICANT	ADDRESS:	<u>May 30, 2000</u> DATE:		PHONE:	<u> </u>
SIGNALUKE OF ALL EICAM		DALL.			:
					PERMIT ISSUED
RESPONSIBLE PERSON IN CHARGE OF WO	RK, TITLE			PHONE:	CEQUPISTRICTUREMENTS
White_	Permit Desk Green–Assessor's Ca	anany_D PW Pink_Put	lic File I	vorv Card-Inspector	

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

White–Permit Desk Green–Assessor's ry D.P.W. Pink–Public File lvory Card–Inspector