Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application	P	ermit No:	Issue Dat	e:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716						05-1468			340 D001001			
Location of Construction: Owner Nam			Owner Name:			Owner Address:				Phone:		
			MACKEIL ARTHUR D KW VET &			5 H	5 HOMESTEAD AVE					
Business Name: Contractor			Contractor Nan	ne:		Con	tractor Addres	ss:		Phone		
			Darrell Davis			6 Nonesuch Cove Road Scarborough			2073293700			
Lessee/Buyer's Name Phone:						Permit Type:			1	Zone:		
						Additions - Dwellings						
Past	t Use:		Proposed Use:		•	Permit Fee: Cost of Work:			ork:	CEO District:		
•				Home/ build a 10' x 20'		\$291.00			00.00			
	<i>6 ,</i>	addition		FIRE DEPT:		Approved		PECTION:				
								_		se Group: Type		
								Denied				
Proj	posed Project Description:		L									
bui	ld a 10' x 20' addition					Signature: Si			Signatu	Signature:		
						PEDESTRIAN ACTIVITIES DISTRI			TRICT (I	<u> </u>		
									proved w	ed w/Condition		
						Action: Approved Approved				w/Condition Denied		
						Signature:		Date:				
Peri	mit Taken By:	Date A	pplied For:	Zoning Approval								
lde	obson	10/04	-/2005									
1.	This permit application of	does not	preclude the	Special Zone or Rev		iews Zoning Appeal			Historic Preservation			
	 This permit application does not preclude the Applicant(s) from meeting applicable State a Federal Rules. 			Shoreland			☐ Variance			Not in District or Landm		
2.	. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscellaneous			☐ Does Not Require Revie			
 Building permits are void if work is not started within six (6) months of the date of issuance. 			☐ Flood Zon		Conditional Us			Requires Review				
False information may invalidate a building permit and stop all work				Subdivision			☐ Interpretatio			Approved		
				☐ Site Plan Maj ☐ Minor☐ MM ☐			Approved			Approved w/Condition		
						☐ ☐ Denied			☐ Denied			
				Date:			Date:		Da	Date:		
I ha juris shal	reby certify that I am the over the land the lan	owner to permit fo	o make this appli r work described	med pro cation a l in the a	as his authorized application is is	ne prod d age sued,	nt and I agree I certify that	to conform	to all ap cial's au	plicable laws of thorized repres	of this sentative	
SIG	SNATURE OF APPLICAN				ADDRES	S		DATI	Ξ.	P	НО	

Location of Construction: Owner Name:		Owner Address:		Phone:	
5 HOMESTEAD AVE	MACKEIL ARTHUR D	KW VET &	5 HOMESTEAD AVE		
Business Name:	s Name: Contractor Name:		Contractor Address:	Phone	
	Darrell Davis		6 Nonesuch Cove Road Scarborough	2073293700	
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:
			Additions - Dwellings		

Dept:	Zoning	Status: Approved	Reviewer:	Tammy Munson	Approval Date:	10/14/2005
Note:					Ok to	Icena.

Dept: Building Status: Approved with Conditions Reviewer: Tammy Munson Approval Date: 10/14/2005

Note: Ok to Issue: ✓

- 1) Permit approved based on the plans submitted and reviewed w/owner/contractor, with additional information as agreed on and as noted on plans.
- 2) Separate permits are required for any electrical, plumbing, or heating.

Comments:

10/12/05-ldobson: Contractor same as 144 Pheasant Hill Drive- Wants same day permit/ spoke w/ Tammy and she is going to Review as same day w. The 144 Pheasant Hill Drive permit. LJD

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО