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: *** *** 27 Cypress St Edgar R. Beaulieu 797-9418 000905 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 27 Cypress St Contractor Name: Permit Issued: Address: Phone: AUG 18 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$1200,00 \$36.00 Single Family Same INSPECTION:"U'deck FIRE DEPT. □ Approved Use Group: R-3Type: 5B ☐ Denied CBL: 344-G-029 BOC 499 Signature: A Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) Action: Approved Special Zone or Reviews Approved with Conditions: Pool deck ☐ Shoreland Denied □ Wetland ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan mai ☐mindr ☐mm ☐ Permit Taken By: Date Applied For: Gay1e August 17, 2000 GG Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ 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 PERMIT ISSUED WITH REQUIREMENTS 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 August 17, 2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CEO PISTRICREMENTS

PHONE: