

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

Location of Construction: Meadow Ridge Condos 1502 Washington Ave. / 50-52 Mugwhy Lane		Owner: **Jandie Development		Phone: 797- 9534	Permit No: 000374
Owner Address: ^{unit 5748} ** 2 Flintlock Lane Falmouth 04105		Lessee/Buyer's Name:		Phone:	BusinessName:
Contractor Name: Same		Address:		Phone:	
Past Use: Vacant		Proposed Use: Foundation ONLY for Condo Project		COST OF WORK: \$ 5,000.00	PERMIT FEE: \$ 54.00
Proposed Project Description: Foundation ONLY for 2 Condo Units		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Foundation Use Group: Type: 00CA99	
		Signature:		Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied			
		Signature:		Date:	
Permit Taken By: KA		Date Applied For: GD April 18, 2000			

Permit Issued:

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Zone: CBL
R-3 PRUD 347-C-038

Zoning Approval: *OK* 4/26/00

Special Zone or Reviews:
 Shoreland *NA*
 Wetland
 Flood Zone - panel 2C - *Emx*
 Subdivision
 Site Plan maj minor mm
Approved previously
Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

PERMIT ISSUED WITH REQUIREMENTS

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

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: April 18, 2000 PHONE: _____

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

PERMIT ISSUED WITH REQUIREMENTS