

Location of Construction: ** 1492 Washington Ave. 04103		Owner: ** John & Angela Fusco		Phone: 207-878-8079		Permit No: <b>990917</b>			
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		BusinessName:			
Contractor Name: N/A		Address:		Phone:		Permit Issued: <b>AUG 23 1999</b>			
Past Use:  3 Unit		Proposed Use:  2 Unit		COST OF WORK: \$ 0		PERMIT FEE: \$ 30.00			
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <i>R-3</i> Type: <i>512</i>			
				Signature:		Signature: <i>[Signature]</i>			
Proposed Project Description: Change of Use from 3 units to 2 units. Combining the second and third floor as one unit. Construction will not be done for this, no structural changes. Owner to remove 3rd fl. Kitchen.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				Zone: <i>R-3</i> CBL: 347-C-040	
				Action: Approved <input type="checkbox"/>		Zoning Approval: <i>2 units of permittcy</i>			
				Approved with Conditions: <input type="checkbox"/>		Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>8/20/99</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision			
				Denied <input type="checkbox"/>		<input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>			
Permit Taken By: <i>ub</i>		Date Applied For: 8-20-99		Signature:		Date:			

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: John & Angela Fusco  
1492 Washington Ave.  
Portland, Maine 03103

**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

8-20-99

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

- 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]*

CEO DISTRICT 2  
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