City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 980 Location of Construction: Owner: Phone: DeRoche, Peter 797-6293 165 Regan Ln Lessee/Buyer's Name: Owner Address: Phone: BusinessName: SAA 04103 Permit Issued: Contractor Name: Address: Phone: .111 - 8 1998 **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: 16,000.00 100.00 1-fam **FIRE DEPT.** □ Approved INSPECTION: Use Group: 9-3 Type: 572 ☐ Denied Zonera CBL: BOCA 96 350-B-018 Signature: Signature: ** Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (A.D.) Action: Approved 1 Car Garage w/attached breezeway & 2nd floor room-□ Shoreland 5/4 Approved with Conditions: 1 1/2 stories total Denied ☐ Flood Zone □ Subdivision Matter Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: SP 02 July 1998 □ Variance to be m This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 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-☐ 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 Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 06 July 1998 DATE: SIGNATURE OF APPLICANT ADDRESS: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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