						PERMIT IS	SSUED	
	v ,	5		Peri	mit No:	Issue Date:	CB_:	
389	Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-871	6	04-1857	BEC 22	350 B	26001
Location of Construction: Owner Name:					Addres:		Phone:	
117 Regan Ln			Macdonald Francis R		Regan _n			
Business Name:		Contractor Name	Contractor Name:		Contractor Address: CITY OF PORTLA			
ļ					2078561000			
								R3
Past Use: Prop		Proposed Use:	•		t Fee:	Cost of Work:	CEO District:	
Single Family Home Single Family DVRT 36 first			Family Home/install majestic		\$57.00 \$3,600.00 FIRE DEPT:		0 5 PECTION:	
						e Group: R3 Type: HVAT Gas		
				Signature Action: Approved App		Sigr	Signature JMB (222/04	
						ved Approved	oved w/Conditions 🔲 Denied	
				Signature:			Date:	
Permit Taken By:Date Applied For:ldobson12/22/2004		Date Applied For: 12/22/2004		Zoning Approval				
		nes not preclude the	Special Zone or Revie	views Zoning Appeal		ng Appeal	Historic Preservation	
	This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		Not IN District or Landmarl	
2.	Buiiding permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous		Does Not Require Review	
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.		Flood Zone		Conditional Use		Requires Review	
			Subdivision		Interpretation		Approved	
9/23/05 of tallen			Site Plan Maj Minor MM Date FM & 12/2.2/04		Approved		Approved w/Conditions	
					Denied		Denied	
					Y Date		Date: AVV	
	А. Историја Историја	ings:	ж ^а м Полого				U	

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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE	

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8/10/05 for Ford - Joh Ferished But never had Clean Anop, admined on min mas to use fingber until Decremes Con be yested to 9/23/04 MM Spoke W/ M/8 Rep (NKCK) & et & Resultis that this 6 a 'O' Closeme Cons 9 Notified Cestonic & Austatler On to Clark