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: John Cofran 207--329-1335 71 Dole Brive Lessee/Buyer's Name: Phone: BusinessName: Owner Address: SAA Permit Issued: Address: Contractor Name: Phone: 75 Highland Cliff Road, Windham, ME 04062 Dan Messer COST OF WORK: PERMIT FEE: Proposed Use: Past Use: \$5,800 50.00 FIRE DEPT. □ Approved INSPECTION: 1-Family Same ☐ Denied Use Group \$.3 Type: 5 BOCO 96 Signature: Signature Zoning Approva Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRIC Action: Approved Special Zone or Reviews Carport 2 walls truss roof. Approved with Conditions: 12' X 20" ☐ Shoreland Denied П □Wetland ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 12/9/98 SP **Zoning Appeal** This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. □ Interpretation ☐ Approved tion may invalidate a building permit and stop all work.. ☐ Denied Historic Preservation District or Landmark □ Does Not Require Review ☐ Requires Review 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 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, ☐ Denied 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 12/9/98 PHONE: SIGNATURE OF APPLICANT ADDRESS: **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT**