a				Dorr	nit No:	Issue Date		CBL:		
City of Portland, Maine 389 Congress Street, 04101	•			·	04-0773	1	2 1 200		006001	
Location of Construction: Owner Name:				Owner Address:						
25 Jackson St Fagone Robin		M		25 Jackson St		aryar	aty of Paril And			
Business Name:	Contractor Name	Contractor Name: Gibraltar Pools			Contractor Address:					
	Gibraltar Poo					t One Topsf	ield	9788872424		
Lessee/Buyer's Name Phone:					Permit Type:			Zone: 2		
_				Swimming Pools						
Past Use:	Proposed Use:	-				Cost of Wor				
Single Family Home		Single Family Home / install 16x24 above ground Pool			\$156.00 \$15,00					
	above ground	Pool		FIRE I	DEPT:	Approved	1,, ,	CTION:	Tuna	
						Denied	Use Gr	roup:	Type:	
								GOOD 1999		
Proposed Project Description:							BOOH 1999			
Install 16x24 above ground Pool					Signature:			Signature: 10 6 6/2/ 10		
January 1002 Fuel 1				PEDESTRIAN ACTIVITIES DISTR						
			Action: Approved Signature:				Approved w/Conditions Denied			
							Date:			
Permit Taken By:	T									
Permit Taken By: Date Applied For: 06/10/2004				Zoning Approval						
1. This permit application of	loss not preclude the	Special Zone or Revie		ews Zoning A		ng Appeal	Appeal Historic Preserv		eservation	
 This permit application does not preclude the Applicant(s) from meeting applicable State ar Federal Rules. 		Shoreland		λ	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Not in District or Landmar			
2. Building permits do not a 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.		☐ Flood Zone			Conditional Use		Requires Review			
False information may in permit and stop all work.	Subdivision Site Plan			Interpretation Approved			Approved w/Conditions			
			Maj Minor MM		Denied		☐ Denied			
			Date: Date: 21		Date:		Date		/>-	
)					4		
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								V		
		_	nenominio : ~	ON						
Til i	C 1 C 1		CERTIFICATI			.1 .		C		
I hereby certify that I am the of I have been authorized by the jurisdiction. In addition, if a pashall have the authority to enter	owner to make this appl permit for work describe	lication and the	as his authorize application is i	d agent ssued, I	and I agree certify that	to conform the code of	to all a ficial's a	pplicable law authorized re	s of this presentative	
such permit.		1	,					- (-)		
SIGNATURE OF APPLICANT			4 DDDF0	c		DATE		Pri -	IONE	
SIGNATURE OF ALFLICANT			ADDRES	J		DATE	•	Ph	IONE	

PHONE

DATE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

5/21/18 - First - 02 / 1/2 / 02