Location of Construction: 87 Garso Drive Lot 9 Aubur	n Pines Owner: Norman Berube Bl	lders. Inc. Phone	^{e:} 883–8270	Permit No:
Owner Address: **Norman Berube Bldrs.	Lessee/Buyer's Name: N/A	Phone: Busin N/A	essName: N/A	- * > 1 1 8 1
Contractor Name:	Address:	Phone:		Permit Issued:
*Normand Berube Builders			3-8270	1 1999
Past Use:	Proposed Use:	COST OF WORK:	PERMIT FEE:	
Vacant	New Single Family with attached garage	<u>\$ 160,000</u>	\$ 984.00	
		FIRE DEPT. Approved INSPECTION:		
	actached galage	Denied	Use Group: P -3 Type: 5B	
			BOCA96 DI	Zone: CBL: 386-AA-009
Proposed Project Description:		Signature:	Signature: Holper.	Zoning Approval:
			3 io/29 gc	
New single family house with	Action: Approved VV Approved with Conditions:		Special Zone or Reviews:	
New Single family house with account gauge			□ Shoreland NA with	
		Denied		
		Signatura	Deter	□ Flood Zone Parel 2 th □ Subdivision
Permit Taken By:	Date Applied For:	Signature:	Date:	Site Plan maj Eminor Emm
UB	Date Applied For.	10-12-99		19990146
				Zoning Appeal
1. This permit application does not preclu	de the Applicant(s) from meeting applicable Sta	ate and Federal rules.		
2. Building permits do not include plumbing, septic or electrical work.				☐ Miscellaneous □ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa- tion may invalidate a building permit and stop all work				
tion may invariance a canading period	and stop an orthogen			Denied
				Historic Preservation
***Send To: Normand Berube Builders				Does Not Require Review
		1040 U.S. Rou	te l	
		Saco , ME	04072 PERMIT ISSUED	Action:
CERTIFICATION WITH REQUIREMENTS 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				
				□ Appoved □ Approved with Conditions
	cation as his authorized agent and I agree to cor			
	ation is issued, I certify that the code official's a			
	able hour to enforce the provisions of the code	-	have the authority to enter an	Date:
		· · · · · · · · · · · · · · · · · · ·		
		10 10 00		
SIGNATURE OF APPLICANT	ADDRESS:	10-12-99	DUONE.	_
SIGNALUKE OF APPLICANT	ADDKE22:	DATE:	PHONE:	PERMITISSUED
				WITH RECHIPCARCHITO
RESPONSIBLE PERSON IN CHARGE OF	WORK, TITLE		PHONE:	CEO DISTRICT

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

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