## 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: . 797–0890 **\*** 88 Garsoe Drive, 04103 Steven & Sharon Smalley Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 88 Garsoe Drive, 04103 Permit Issued: Contractor Name: Address: Phone: Sebago Lake Pools 629 Lower Main St, 04038 COST OF WORK: Proposed Use: PERMIT FEE: Past Use: MAY 15 \$ 15,666.50 120.00 SAME Single Family Dwelling **FIRE DEPT.** □ Approved INSPECTION: Use Group: UType: ☐ Denied CBL: BOCA 89 386A-B-023 Signature: Signature: / Proposed Project Description: Zoning Approval PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved Special Zone or Reviews: Build in-ground swimming pool (18' x 36') with Approved with Conditions: ☐ Shoreland concrete patio. Denied ☐ Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: NC 5-09-2000 GD **Zoning Appeal** □ Variance 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. 2. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation Please Call for P/u 797-0890 (H) or Steve 883-3417 (w) .⊡∕Not in District or Landmark ☐ Does Not Require Review PERMIT ISSUED □ Requires Review WITH REQUIREMENTS 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 □ 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 5-09-2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PERMIT ISSUED

CEM HISTEUDIREMENTS