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:** **** Daniel Higgins 797+8419 **** 106 Caron Street Lessee/Buyer's Name: BusinessName: Owner Address: Phone: SAA Permit Issued: Contractor Name: Address: Phone: SAA JUL 1 N 2000 COST OF WORK: Past Use: Proposed Use: PERMIT FEE: 4,000 \$ 90.00 . 4 single family same FIRE DEPT. □ Approved INSPECTION: Use Group #-3 Type:5/2 ☐ Denied CBL: BOCA99 Zone: 387-A-006 Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: Renovate sun room and deck adding 5' to deck Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: July 7 2000 K K 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 Mot in District or Landmark ☐ Does Not Require Review □ Requires Review PERMIT ISSUED 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit July 7 2000 DATE: SIGNATURE OF APPLICANT ADDRESS: PHONE: PERMIT ISSUED WITH REQUIREMENTS RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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

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CEO DISTRICT