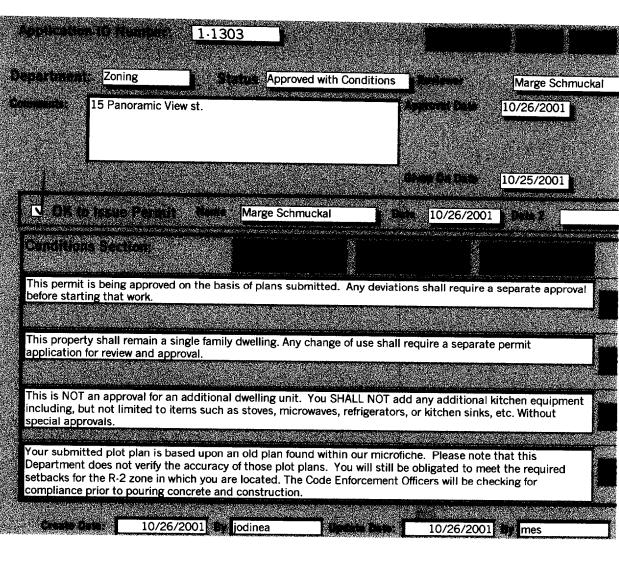
Location of Construc		Owner Name:	, Fax: (207) 874-871	Owner Ade	11303	1 6 201	Л —						
15 Panoramic Vie		homas L Wwii Vet &					Phone: 207-878-2038						
Business Name:	, w 5t	:	Contractor	PITY OF	PORT	AND	Phone						
n/a		/	ı		t Gorham		2078391444						
Lessee/Buyer's Name		<u></u>	Permit Typ		Comain	Zone:							
n/a		n/a207-		1	-	llings			R-2				
Past Use:		Proposed Use:		Additions - Dwellings  Permit Fee: Cost of Wo					rk: CEO District: 10.06				
Single Family		1 -	/ 18' x 19' Addition		234.00	\$35,00		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
,			Single Family / 10 x 15 Addition					SPECTION:					
						Approved Denied	Use Grou	ം <i>ദ</i> ദ	Type:5				
						•	3		<b>વ</b> ધ				
Proposed Project Des	cription:	<u> </u>		1					, ,				
Build 18' x 19' Ad	ldition			Signature:			Signature:						
				PEDESTR	IAN ACTI	VITIES DIST	RICT (P.A	D.)					
				Action:	Approv	ed App	roved w/Co	onditions	Denied				
				Signature:	Signature:			Date:					
Permit Taken By:		pplied For: 7/2001			Zoning	Approva	1						
	pplication does not		Special Zone or Revie	ews Zoning Appeal			Historic Preservation						
	from meeting applic		☐ Shoreland		Variance		Not in District or Landman						
2. Building perm septic or electrons	nits do not include   trical work.	plumbing,	☐ Wetland	Miscellaneous			Does Not Require Review						
	nits are void if work months of the date		Flood Zone		Condition	onal Use		Requires Revi	ew				
False informate permit and stop	tion may invalidate op all work	a building	☐ Subdivision	[ Interpretation			Approved						
				Approved			Approved w/Conditions						
			Maj Minor MM		Denied			☐ Denied					
			Date	Date	3		Date						
			5 10/2	6/0/1Dan			Date	·	•				
			CERTIFICATION	ON									
I hereby certify tha	t I am the owner of	record of the na	med property, or that the		d work is	authorized	by the ou	mer of recor	and that				
I have been authori	zed by the owner to	make this appli	cation as his authorized	l agent and	d I agree t	to conform t	o all appl	icable laws of	of this				
jurisdiction. In add	lition, if a permit fo	r work described	d in the application is is	sued, I cer	rtify that t	he code offi	cial's aut	horized repre	esentative				
such permit.	ority to enter all are	as covered by su	ch permit at any reasor	able hour	to enforc	e the provis	sion of the	e code(s) app	licable to				
SIGNATURE OF APP	LICANT		ADDRESS	3		DATE		PHON	NE				
RESPONSIBLE PERS	DATE PHO					JE.							

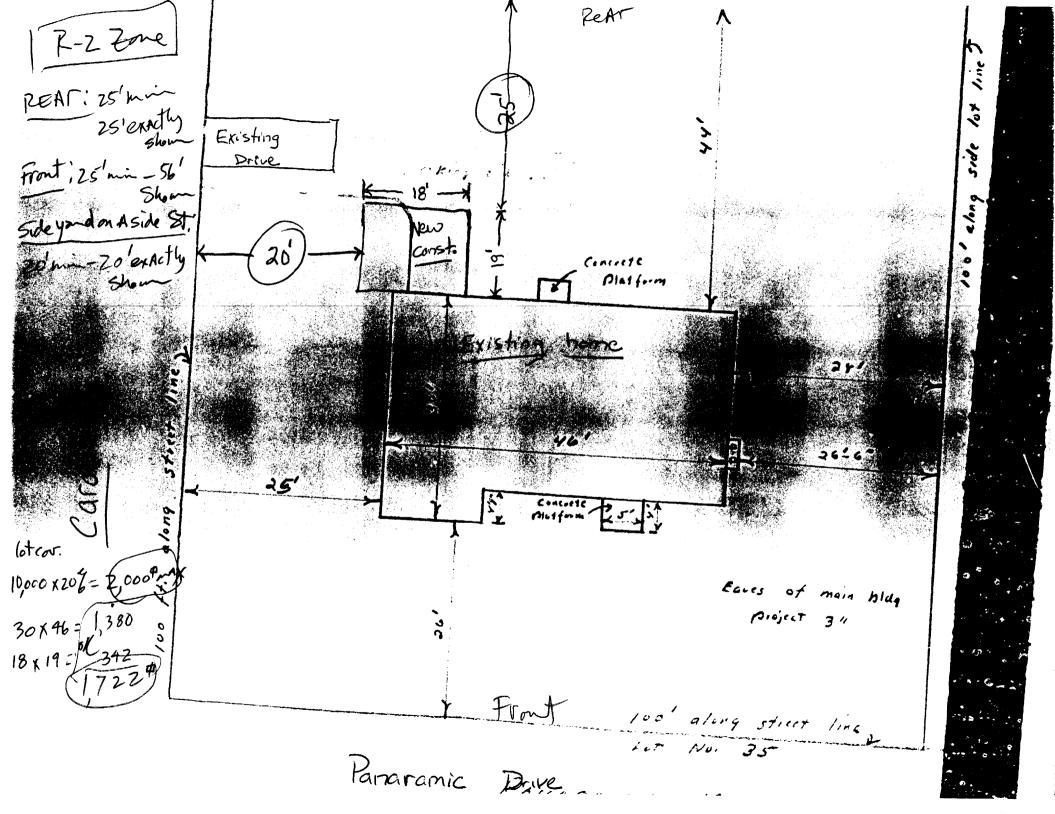
## All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 15 Panoramic Drive, Portland, Me.								
Total Square Footage of Proposed Structure 342 Square Footage of Lot								
Tax Assessor's Chart, Block & Lot Owner:  Chart# 387 Block# C Lot# Ool Mc Donough  Telephone:  878 - 2038								
Lessee/Buyer's Name (If Applicable)  Applicant name, address & 1839 1444 Cost Of telephone: Tany Esposito Work: \$ 35,000    116 might st.    Godan Me. 04038 Fee: \$ 234.00								
Current use:								
If the location is currently vacant, what was prior use:								
Proposed use:    S   T   Project description:   T x 19   add   T   T   T   T   T   T   T   T   T								
Contractor's name, address & telephone:								
Who should we contact when the permit is ready: Teny Esposito  Mailing address: 116 Mighty St.  Forham Me, 04038  Phone: 839 1444								
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.  If hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of the iurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.								
Signature of applicant:    DEPT OF BUILDING INSPECTION   17 - 200     CITY OF POSTLAND, ME								
This is not a permit, you may not commence ANY work until the permit is issued /								

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CBL 387-C-1 STREET ADDRESS 15 Panorauice View DATE TIME CONTACT NARRATIVE erfect Monumentation with strugglines sarvey including

## EGRESS WINDOW CHART 5.7

SQUARE FEET

WIDTH I N C H E S																	
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24	3.3	3.5	3.6	3.8		4.1	4.3	4.5	4.6	_	30	31	32	33	34	35	36
25	3.4	3.6	3.8	3.9	4.1	4.3	4.5	4.6	4.8	4.8 5.0	5.2	5.1	5.3	5.5	5.6	5.8	6
26	3.6	3.7	3.9	4.1	4.3	4.5	4.6	4.8	5.0	5.2		5.3	5.5	5.7	5.9	6.0	6.2
27	3.7	3.9	4.1	4.3	4.5	4.6	4.8	5.0	5.2	1	5.4	5.5	5.7		6.1	6.3	6.5
28	3.8	4.0	4.2	4.4	4.6		5.0	5.2	5.4	5.4	5.6	5.8		6.1	6.3	6.5	6.7
29	4.0	4.2	4.4	4.6	4.8	5.0	5.2	5.4	5.6	5.6	5.8	6.0	6.2		6.6	6.8	7
30	4.1	4.3	4.5	4.7	5	5.2	5.4	5.6	5.8 5.8	5.8		6.2	6.4	6.6	6.8	7.0	72
31	4.3	4.5	4.7	4.9	5.1	5.3	5.5	5.8		6.0	6.2	6.4	6.6	6.8	7.0	7.2	7.5
32	4.4	4.6	4.8	5.1	5.3	5.5	5.7	6		6.2	6.4	6.6	6.8	7.1	7.3	7.5	7.7
33	4.5	4.8	5.0	5.2	5.5	5.7			6.2	6.4	6.6	6.8	7.1	7.3	7.5	7.7	8
34	4.7	4.9	5.1	5.4	5.6	5.9		6.1	6.4	6.6	6.8	7.1	7.3	7.5	7.7	8.0	8.2
35	4.8	5.1	5.3	5.5	5.8		6.1	6.3	6.6	6.8	7.0	7.3	7.5	7.7	8.0	8.2	8.5
36	5	5.2	5.5	5.7	6	<del></del>	6.3	6.5	6.8	7.0	7.2	7.5	7.7	8.0	8.2	8.5	8.7
37	5.1	5.3	5.6	5.9	6.1	6.2	6.5	6.7	7	7.2	7.5	7.7	8	8.2	8.5	8.7	9
38	5.2	5.5	5.8	6.0	6.3	6.4	6.6	6.9	7.1	7.4	7.7	7.9	8.2	8.4	8.7	8.9	9.2
39	5.4	5.6	5.9	6.2		6.5	6.8	7.1	7.3	7.6	7.9	8.1	8.4	8.7	8.9	9.2	9.5
40	5.5	5.8	6.1		6.5	6.7	7.0	7.3	7.5	7.8	8.1	8.3	8.6	8.9	9.2	9.4	9.7
41	5.6	5.9	6.2	6.3 6.5	6.6	6.9	7.2	7.5	7.7	8.0	8.3	8.6	8.8	9.1	9.4	9.7	10
42	5.8	6.1	6.4	6.7	6.8	7.1	7.4	7.6	7.9	8.2	8.5	8.8	9.1	9.3	9.6	9.9	10.
43	5.9	6.2	6.5		7	7.2	7.5	7.8	8.1	8.4	8.7	9.0	9.3	9.6	9.9	10.	10.
44	6.1	6.4	6.7	6.8	7.1	7.4	7.7	8.0	8.3	8.6	8.9	9.2	9.5	9.8	10.	10.	10.
45	6.2	6.5		7.0	7.3	7.6	7.9	8.2	8.5	8.8	9.1	9.4	9.7	10.	10.	10.	11
46	6.3	6.7	6.8 7.0	7.1	7.5	7.8	8.1	8.4	8.7	9.0	9.3	9.6	10	10.	10.	10.	11.
47	6.5	6.8	7.0	7.3	7.6	7.9	8.3	8.6	8.9	9.2	9.5	9.9	10.	10.	10.	11.	11.
48	6.6	7	7.1	7.5	7.8	8.1	8.4	8.8	9.1	9.4	9.7	10.	10.	10.	11.	11.	11.
49	6.8	7.1	7.4	7.6	8	8.3	8.6	9	9.3	9.6.	_10	10.	10.	11	11.	11.	12
50	6.9	7.2		7.8	8.1	8.5	8.8	9.1	9.5	9.8	. 10.	10.	10.	11.	11.	11.	12.
<u> </u>	0.5	1.2	7.6	7.9	8.3	8.6	9.0	9.3	9.7	10.	10.	10.	11.	11.	11.	12.	12.