City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: *** MARK COOKE Location of Construction: Phone: Permit No: 797-7771*** 16 CRESTVIEW DRIVE 061384 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: SAA **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: :: 03,000 \$ 42.00 **FIRE DEPT.** □ Approved INSPECTION: SAME SINGLE FAMILY ☐ Denied Use Group: 8-3Type: 5 **CBL**: 388-A-027 BOC A94. Signature: Signature: 妆 **Proposed Project Description:** PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved Approved with Conditions: 2ND FLOOR BEDROOMS AND BATH ONLY SHEET ROCK INTER. RENO. ☐ Shoreland Denied □ Wetland ONLY IN LARGE ROOM ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: DEC 5 2000 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 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □ Approved tion may invalidate a building permit and stop all work... ☐ Denied / Aistoric Preservation Not in District or Landmark □ Does Not Require Review ☐ Requires Review 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 PERMIT ISSUED PERMIT ISSUED WITH REQUIRENTS areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit DEC 5 2000 K 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

CEO DISTRICT