Form#P04

Health Dept.

Opperal Board

Department Name

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

טוס	PLAT THIS C	ARD ON Pr	MINCIPAL FR	UNIAGE (JE VVOR	ir.	
Please Read Application And	CI	B OF I	PORTLA				
Notes, If Any, Attached		PE	RMIT	Permit	PERM	it issuei	<u>)</u>
This is to certify rnat_	Mcauley Penny J/fortir	const					
has permission to	Adding a 12x16 deck				MAY	2 3 2005	
AT _25 Caron St				388 B001001			
	ne person or persons of the Statutes		nation ept	ting this per	nifety pe	PORTLA	NP _{au}
	n, maintenance a		of the same and sings and street				
	orks for street line re of work requires	gi and wr n be e this t d la d or c	inspec in must in permis in procupling or in the recursion of the recursio	procure	icate of occu d by owner b art thereof is	efore this b	
OTHER REQU	IRED APPROVALS					i /	

PENALTY FOR REMOVING THIS CARD

ctor - Building & Inspection Services

			PFRM	IIT ISSUED
,	aine - Building or Use 1101 Tel: (207) 874-870		1 11	CBL:
Location of Construction:	Owner Name:		Owner Address:	Phone
25 Caron St	Mcauley Pen	ny J	25 Caron St	
Business Name:	Contractor Nam	e:	Contractor Address: CITY	F-PORTLAND
	fortin constru	ction inc	1125 Forest A ve Portland &	и Dobec 2078717920
Lessee/Buyer's Name	Phone:		Permit Type: Additions - Dwellings	Zone: /2 - 2
Past Use:	Proposed Use:	12'x16	Permit Fee: Cost of Work	k: CEO District:
Single Family	Single Family	adding a 2x16 deck	\$84.00 \$6,65	50.00 5
			FIRE DEPT: Denied	INSPECTION: Use Group: 2.3 Type: 575 TRC 2003
Adding a 12x16 deck			Signature:	To A
			Action: Approved App	TRICT (P.A.D.) proved w/Conditions Denied
			Signature.	Date:
Permit Taken By: dmartin	Date Applied For: 05/17/2005		Zoning Approva	ı l
		Special Zone or Revie	ews Zoning Appeal	Historic Preservation
	on does not preclude the eeting applicable State and	Shoreland	☐ Variance	Not in District or Landmar
2. Building permits do septic or electrical w		Wetland	Miscellaneous	Does Not Require Review
within six (6) months	void if work is not started of the date of issuance.	☐ Floor Zone	Conditional Use	Requires Review
False information ma permit and stop all w	y invalidate a building ork	Subdivision	Interpretation	Approved
		Site Plan	Approved	Approved w/Conditions
		Maj Minor MM Date: 5 20 05	Denied	Denied.
		Date: 5 20 05	Date:	Date: 5/20/05
				1
		CERTIFICATION	ON	
I have been authorized by jurisdiction. In addition, i	the owner to make this apple f a permit for work describe	lication as his authorized at in the application is is	d agent and I agree to conform to ssued, I certify that the code off	

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE

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: $\mathcal{J}\mathcal{S}$	CARONST PORTland				
Total Square Footage of Proposed Structu		2000 S9 F			
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# ろとと	Owner: FRANY McCARITY 25 CARON ST POST/BAL	Telephone:			
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: FORT · N CONST. INC. 35 MARKAKIYN ST AUDUNN, ME 64310 786 8737	Cost Of Work: \$ 4650.04 Fee: \$ 84.00			
Current use:					
Contractor's name, address & telephone: Fort in Construction The 35-Markhryn St Bub 786-873 Who should we contact when the permit is ready: Kon Dukue Mailing address: We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$100.00fee if any work starts before the permit is picked up. PHONE: 786-8737					
IF THE DECLUDED INTEGRAL ATTION HE A FOT IN IOL		WI DE ALECOMATION IN			

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.

I hereby certify that I am the Owner of record of the named properly, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of his jurisdiction. 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:	Mont. due	Date: 05/12/0	5

This is NOT a permit, you may not commence ANY work until the permit is issued. If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4th floor of City Hall

9284

