## 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: 1 Caron St., Portland, ME 04103 Sheldon Ashby 797-000 990783 Lessee/Buyer's Name: Phone: BusinessName: Owner Address: 1 Caron St. Permit Issued: Address: Phone: Contractor Name: Z 3 .... N/A COST OF WORK: PERMIT FEE: Proposed Use: Past Use: \$42.00 \$2,500.00 **FIRE DEPT.** □ Approved INSPECTION: Pool Single Family dwelling Same ☐ Denied Use Group: Type: BOC 496 388-B-012 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT ( Action: Approved Special Zone or Reviews Approved with Conditions: □ Shoreland Install 30x15 above-ground pool Denied $\Box$ □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: Kathy July 21, 1999 Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ 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 Historic Preservation Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS **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 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, □ Denied 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 July 22, 1999 ADDRESS: DATE: PHONE: SIGNATURE OF APPLICANT

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

PHONE:

**CEO DISTRICT** 

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE