	y of Portland, Maine -	O				ermit No: 03-0748	Issue Dat	e:	CBL: 389 C00	12001	
	Congress Street, 04101		Fax: (2	207) 874-8716)5001	
Location of Construction: Owner Name: 122 Crestview Dr Martin Lisa G			(Owner Address: 122 Crestview Dr			Phone: 207-878-2787		
	iness Name:		Contractor Name: Scott LuSciuto			ractor Address	·•		Phone	707	
Dus	iness itume.					283 Falmouth Road Windham			2078920436		
Lessee/Buyer's Name Phone:					Permit Type: Additions - Dwellings				Zone:		
Dogs	t Use:	Duonogod Ugo.]	<u> </u>		Cost of Wo	ulr.	CEO District:	<u> </u>	
	gle family	_	roposed Use: single family - extend rear deck and rebuild front stairs		rern	Permit Fee: Cost of Works \$37.00 \$2,00					
	8						INSPECTION:				
							_	Use Gr		Type	
Pro	posed Project Description:										
ext	end rear deck and rebuild fr	ont stairs			Signature:		Signature:				
					PEDESTRIAN ACTIVITIES DISTRIC			TRICT (CT (P.A.D.)		
					Actio	on Appro	ved App	proved w	oved w/Condition Denied		
		T	ı		Signa				Date:		
Peri	mit Taken By:	Date Applied For: 06/27/2003				Zoning	Approva	l			
1.	This permit application do		Spec	ial Zone or Revi	ews	Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting Federal Rules.	-	Shoreland		☐ Variance			Not in District or Landm			
2.	Building permits do not include plumbing,		☐ Wetland		Miscellaneou			Does Not Require Revie			
3.	septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work		☐ Flood Zon		Conditional Us			Requires Review			
			Subdivision			☐ Interpretati			Approved		
			Site Plan			Approved			Approved w/Condition		
			Ma [Mino M		☐ Denied			Denied		
			Date:			Date:		D	ate:		
I ha juri: shal	creby certify that I am the overee been authorized by the consdiction. In addition, if a pell have the authority to ente uch permit.	owner to make this appliermit for work described	med procession and the second	as his authorized application is is	ne prop d agen sued, I	t and I agree to certify that the	o conform t se code offic	o all ap cial's au	pplicable laws of the state of	of this sentative	
SIC	GNATURE OF APPLICAN			ADDRES	S		DATE	Ľ	P	НО	

Location of Construction:	Owner Name:	Owner Address:	Phone:
122 Crestview Dr	Martin Lisa G	122 Crestview Dr	207-878-2787
Business Name:	Contractor Name: Scott LuSciuto	Contractor Address: 283 Falmouth Road Wind	Phone ham 2078920436
Lessee/Buyer's Name Phone:		Permit Type: Additions - Dwellings	Zone:
Dept: Zoning Stat	tus: Approved	Reviewer: Tammy Munson	Approval Date: 06/27/2003

Dept:	Zoning	Status: Approved	Reviewer:	Tammy Munson	Approval Date:	06/27/2003
Note:					Ok to Issue:	
Dept:	Building	Status: Approved	Reviewer:	Tammy Munson	Approval Date:	06/27/2003
Dept:	Building	Status: Approved	Reviewer:	Tammy Munson		06/27/2 o Issue:

CERTIFICATION

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 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 areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO