City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Phone: 878-2634 Location of Construction: Permit No: 😜 ***19 Whitehead Circle 04103 William M. Woods Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: RT#25 Gorham, Maine 856-1000 Sebago Lake Pool; 7 1999 Past Use: COST OF WORK: PERMIT FEE: Proposed Use: \$ 35.00 **\$** 3,116 **FIRE DEPT.** □ Approved INSPECTION: Same 1-Family ☐ Denied Use Group: *U* Type: CBL: 393-F-026 BOCA 90 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Special Zone or Revie Install above ground swimming pool. Approved with Conditions: ☐ Shoreland Denied П □ Wetland □ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: SP 5-28-99 **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. ☐ 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 Action: CERTIFICATION ☐ Appoved ☐ Approved with Cenditions 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 □ 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 6-1-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

PHONE:

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE