City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

	Owner:				
Location of Construction:	Phone:		Permit No:		
118 Roaring Brook Rd. 04103	Tim Masse			797–3497	1 2 5 3 9 9
Owner Address:	Lessee/Buyer's Name:	Phone:	Business	sName:	T G 9 1 4
118 Roaring Brook Rd. 04103					<u></u>
Contractor Name:	Address:	Phone:			Permit Issued:
Highland Builders	13 Pine Dr. Windham 040	62	*892-5		
Past Use:	Proposed Use:	COST OF WORK:	:	PERMIT FEE:	
		\$ 8,000.00		\$ 72.00	
Single Family	Same	FIRE DEPT. □ Approved □ Denied		INSPECTION:	1
2				Use Group: 1-3 Type: 5/	·
				BOCA96,00	Zone: CBL: 395-K-014
		Signature:		Signature: Holer.	395-K-014
Proposed Project Description:			TIVITIE	S DISTRICT (P.A.D.)	Zoning Approval: matrix
					Or with Command
		Action: Approved Approved with Conditions:			Julian Zune un Keviews.
Interior Re	Denied Conditions.			Shoreland to remain	
Renovations	s to 2nd Floor of Attached	Bellied		_	□ Wetland □ Flood Zone □ CA □ Wetland
Garage.		Signature:		Date:	□ Subdivision
Day is Tiles Day	Data Applied For			Date.	☐ Site Plan maj ☐minor☐mm ☐
Permit Taken By: UB	Date Applied For: GD	November 9,1	.999		11/12/99
					Zoning Appeal (
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.					□ Variance
					☐ Miscellaneous
					□ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-					□ Interpretation
tion may invalidate a building permit and stop all work					☐ Approved ☐ Denied
					Li Dellied
*Please call Scott for Pickup					Historic Preservation
892-5775					Not in District or Landmark
					□ Does Not Require Review
					□ Requires Review
					Action:
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					□Appoved
					☐ 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,					
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					Date:
areas covered by such permit at any reasonable ho	ur to enforce the provisions of the code(s) applicable to such po	ermit		Date:
		November 9,1999			
CICNIATUDE OF ADDITIONAL	ADDRESS:	DATE:	レノフブ	PHONE:	-
SIGNATURE OF APPLICANT	ADDRESS:	DAIE:		FHUNE:	<u> </u>
					PERMIT ISSUED
RESPONSIBLE PERSON IN CHARGE OF WORL	C. TITLE			PHONE:	THE BEDISHREWENTS2
REST STOIDED I EROOM IN CHIMOD OF WORL	-,				CEU DISTRIBUTE 11 102
White-Pe	rmit Desk Green-Assessor's Cana	ry–D.P.W. Pink–Publ	lic File I	vory Card-Inspector	