

Location of Construction: 45 Olde Birch Ln		Owner: Mark & Judith Maloney		Phone: 797-9649	
Owner Address: 45 Olde Birch Ln- PtldME 04103		Leasee/Buyer's Name:		Phone:	
Contractor Name:		Address:		Phone:	
Past Use: 1-fam dwlg		Proposed Use: 1-fam w home ocptn (daycare - 6 chn)		COST OF WORK: \$	
				PERMIT FEE: \$ 25	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: Type:	
				Signature: Signature:	
Proposed Project Description: change of use - to 1-fam w home occupation (daycare to 6 chn)		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)			
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied			
		Signature: Date:			
Permit Taken By: L Chase		Date Applied For: 11/13/96			

Permit No: **961137**

PERMIT ISSUED

Permit Issued:
NOV 19 1996

CITY OF PORTLAND

Zone: **R-2** CBL: **396-C-034**

Zoning Approval:
with conditions

Special Zone or Reviews:

Shoreland *11/15/96*

Wetland

Flood Zone

Subdivision

Site Plan maj minor mm

Zoning Appeal

Variance

Miscellaneous

Conditional Use

Interpretation

Approved

Denied

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

PERMIT ISSUED WITH REQUIREMENTS

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 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

Mark A Maloney

SIGNATURE OF APPLICANT ADDRESS: DATE: *11/13/96* PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

Historic Preservation

Not in District or Landmark

Does Not Require Review

Requires Review

Action:

Approved

Approved with Conditions

Denied

Date: *11/14/96*

J. Anderson

CEO DISTRICT **7**

K. Carroll