•	aine - Building or Use			ermit No:	Issue Date:	CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703		3, Fax: (207) 874-87		06-099I		397 C0	14001
Location of Construction: Owner Name:		VOCEL MADY LA	Owner Address:		DD	Phone:	
		-VOGEL MARY I &		89 DEEPWOOD DR Contractor Address:		Dhama	
Business Name:	Contractor Name Home owner	2:	Contr	ractor Address:		Phone	
Lessee/Buyer's Name	Phone:			it Type:			Zone:
Elebsed Duyer S I talle	i none.				(* T *1		R2
Past Use:	Proposed Use:			erations - Mul	Cost of Work:	EO District:	1
Single Family	-	Single Family Detatched 18'9" x 12'5" deck		\$30.00	\$500.0	^	4
Shigle I anniy				SIDE DEPT			
				Lise Group: Type:			Type:
			{] Denied		J 1
	I		1				
Detatched 18'9" x 12'5"			Signature: Signa		ature:		
			PEDESTRIAN ACTIVITIES DISTRICT				
		Action Approved Ap		red Approve	pproved w/Conditions		
					borod wiredsharmons		
						Date:	
Permit Taken By:			Zoning	Approval			
dmartin	07/06/2006				· · · · · · · · · · · · · · · · · · ·	T	
	on does not preclude the	lude the Special Zone or Revi		ews Zoning Appeal		Historic Preservation	
Applicant(s) from meeting applicable State and		Shoreland					
Federal Rules.							
2. Building permits do not include plumbing,		Werland		Miscellaneous		Does Not Require Review	
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		Flood Zone		Conditional Use		Requires Review	
		Subdivision		Interpretation		Approved	
I I		Site Plan		Approve	d	Approved w/	Conditions
		Sher fair			u		Continuons
		Maj 🦳 Minor 🦳 MM	4 🗖	Denied		Denied	
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		Date:		Date:		late:	
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/		CEDTIFICAT	ION				

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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE