City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 797-7943 Sandra Bassett ** ** 12 Vermont Ave. 000569 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: N/A 12 Vermont Ave. Portland Permit Issued: Phone: Contractor Name: Address: Namco Pool COST OF WORK: PERMIT FEE: Past Use: Proposed Use: MAY 3 n \$ 2,400.00 \$ 42.00 pool FIRE DEPT. □ Approved INSPECTION: ☐ Denied Use Group:// Type: 406-A-014 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Approved Action: Approved with Conditions: 21x52 above ground pool Denied □ Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: JF KA May 26, 2000 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use ☐ Interpretation Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. ☐ 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 Conditions 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit May 26, 2000 ADDRESS: DATE: PHONE: SIGNATURE OF APPLICANT RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: