Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application]	Permit No:	Issue Dat	e:	CBL:		
389	Congress Street, 04101	Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		04-1346			406 F05	4001	
Location of Construction: Owner M			Owner Name:	ner Name:		Owner Address:			Phone:			
0 Stepping Stone Ln -lot #4			Cole Dean			21	21 C Great Falls Rd					
			Contractor Name:			Cor	Contractor Address:			Phone		
			Windemere Homes			14 Windemere Lane Saco			207228423	33		
Less	see/Buyer's Name	Phone:			Permit Type:			1	Zone:			
,						Single Family						
Past	t Use:		Proposed Use:			Permit Fee: Cost of Work:			ork:	CEO District:		
			-	Home / 4 Bedroom, 2		\$1,686.00		\$185,0		4		
			car attached ga			FIRE DEPT:		Approved	INSPEC			
								_	Use Gre		Type	
							L	Denied		•	• •	
Pro	posed Project Description:		1			1						
	Bedroom, 2 car attached ga	rage				Signature: S			Signatu	Signature:		
	, ,	υ				PEDESTRIAN ACTIVITIES DISTRI			U	<u>c</u>		
						Action: Approved Approved				w/Condition Denied		
						Sig	nature:			Date:		
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval						
ld	obson	08/27	//2004				Zomig Approva					
1.	This permit application of	does not	nreclude the	Special Zone or Reviews		ews	s Zoning Appeal			Historic Preservation		
 This permit application does not pre Applicant(s) from meeting applicable Federal Rules. 			-			☐ Variance			☐ Not in District or Landm			
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		☐ Miscell	Miscellaneous		☐ Does Not Require Revie			
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 Zon		Conditional Us			Requires Review			
				Subdivision			☐ Interpretatio			Approved		
			Site Plan			Approved			Approved w/Condition			
				Maj Minor MM			Denied			☐ Denied		
				Date:			Date:		Da	Date:		
I ha juris shal	reby certify that I am the over the land the lan	owner to permit fo	o make this appli r work described	med pro cation a in the a	as his authorized application is is	ne pi d age	ent and I agree, I certify that t	to conform	to all ap cial's au	plicable laws of thorized repres	of this sentative	
SIG	NATURE OF APPLICAN				ADDRES	S		DATI	3	P	НО	

Location of Construction:	Owner Name:	Owner Address:	Phone:	
0 Stepping Stone Ln -lot #4 Cole Dean		21 C Great Falls Rd		
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Windemere Homes	14 Windemere Lane Saco	2072284233	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
	Single Family			

 Dept:
 Zoning
 Status:
 Approved with Conditions
 Reviewer:
 Marge Schmuckal
 Approval Date:
 09/21/2004

 Note:
 Ok to Issue:
 ✓

- 1) Separate permits shall be required for future decks, sheds, pools, and/or garages. Only a rear stoop and step shown on rear NO REAR DECKS are shown or approved. NO DAYLIGHT BASEMENT shown or approved
- 2) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept:BuildingStatus:Approved with ConditionsReviewer:Jeanine BourkeApproval Date:09/29/2004Note:9/28/04 spoke w/Frank P. About additional information.He will submit tomorrow.Ok to Issue:✓9/29 revised building plans submitted, ok to issue

- 1) Application approval based upon information provided by applicant and revised on 9/29/04. Any deviation from approved plans requires separate review and approval prior to work.
- 2) A copy of the enclosed chimney disclosure must be submitted to this office upon completion of the permitted work or for the Certificate of Occupancy.

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 APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО