



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

**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:** Building      **Status:** Approved with Conditions      **Reviewer:** Jeanine Bourke      **Approval Date:** 09/29/2004

**Note:** 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.

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SIGNATURE OF APPLICAN

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PHO

\_\_\_\_\_  
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PHO