City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871				•	Per	mit No: 04-0669	Issue Dat	e:	CBL: 408 D004001	
Location of Construction: Owner Name:			$1^{\circ}ax. (207)$			r Address:			Phone:	1001
			Egeland John A Jr &		1155 Washington Ave			207-797-0468		
			Contractor Name:		Contractor Address:			Phone		
Lessee/Buyer's Name Ph		Phone:	Phone:		Permit Type: Swimming Pools				Zone:	
Past Use: Pro		Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:		rk:	CEO District:		
Sin	gle Family	Single Family	Single Family w/15' round above-			\$30.00	\$1	75.00	4	
		ground pool in	ground pool installed		Approved			PECTION: Group: Type		
-	oosed Project Description: round above-ground pool i	nstalled			Signature: Sign		Signatu	mature		
10	iound acore ground poor				PEDESTRIAN ACTIVITIES DISTRIC		U			
					Action: Approved Approved Signature:			w/Condition Denied		
								Date:		
Permit Taken By:Date Applied For:kwd05/24/2004		Zoning Approval								
1. This permit application does not preclude t		pes not preclude the	Special Zone or Reviews		ws	Zoning Appeal			Historic Preservation	
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland			Variance			Not in District or Landma	
2.	Building permits do not include plumbing, septic or electrical work.		U Wetland			Miscellaneous			Does Not Require Revie	
3.			Flood Zon			Conditional Us			Requires Review	
					Interpretatio			Approved		
			Site Plan		Approved			Approved w/Condition		
			Maj 🗌 N	∕linor∏ MM[ב	Denied			Denied	
		Date:			Date:		Da	ate:		

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

		Owner Name: Egeland John A Jr		Owner Address: 1155 Washington Ave	e Phone: 207-797-	Phone: 207-797-0468	
		Contractor Name:	Contractor Name:		Phone	Phone	
Lessee/Buyer's Nan	ıe	Phone:		Permit Type: Swimming Pools		Zone:	
Dept: Zoning Status: Pending Note:		Reviewer:	Jeanine Bourke	Approval Date: Ok to Iss	ue: 🗆		
Dept: Building Note:	Status:	Pending	Reviewer:	Jeanine Bourke	Approval Date: Ok to Iss	ue: 🗆	

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