City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Permit No: ***** 878-6735**** Mary Anne Leclair 99 Huntington Ave 000880 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: SAA Permit Issued: Address: Phone: Contractor Name: Sheds Happens **** Jeff Bailey**** AUG 1 4 2000 COST OF WORK: PERMIT FEE: Proposed Use: Past Use: \$ 36.00 \$ 1,475.00 same single family FIRE DEPT. □ Approved **INSPECTION:** Use Group: 4 Type: 5/3 ☐ Denied Zone: CBL: BOCA99 410-F-013 Signature: Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved with Conditions: ☐ Shoreland ▶ 8x12 Shed - 91.9 Denied ☐ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor dmm ☐ Permit Taken By: Date Applied For: July 24 2000 K K 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 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation ☐ Does Not Require Review PERMIT ISSUED WITH REQUIREMENTS ☐ 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 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, ☐ Denied 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 July 25 2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: PERMIT ISSUED WITH REQUIREMENTS RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: CEO DISTRICT

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector