## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 574-8703, FAX: 874-8716

cocation of Construction:  Huntington Ave Lot 1	Owner: KTO Builders	Phone: 892-7813		2-7813	Permit No. 9 8 0 5 0 6
Owner Address:	Lessee/Buyer's Name:	Phone:	Business		PERMIT ISSUED
Contractor Name: SAA	Address:	Phone	Phone:		Permit Issued:
Past Use:	Proposed Use:	COST OF WORK \$ 60,000	COST OF WORK: \$ 60,000		
VAcant Land	l-fam dwelling	FIRE DEPT. □ Approved □ Denied		INSPECTION: Use Group 93 Type: 55	CITY OF PORTLAND
		Signature:	ı	Cocky 96 Signature: No fixe	20ne:2 CBL: -3 410-F-21
Proposed Project Description:  PEDESTRIAN ACTIVITIES DISTRICT (P. D.)					Zoning Approval:
l-family dwelling	A	Approved Approved w Denied	□ Special Zone or Reviews: □ Shoreland □ Wetland □ Flood Zone		
		Signature:		Date:	☐ Subdivision☐ Site Plan maj ☐minor ☐mm ☐
Permit Taken By: Sherry Pinard	Date Applied For: Ap	ril 21, 1998			Dolle Flatt maj Eminor Emm E
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.  Building permits do not include plumbing, septic or electrical work.  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  call for p/u 892-7813  PERMIT ISSUED					□ Variance □ Miscellaneous □ Conditional Use □ Interpretation □ Approved □ Denied  Historic Preservation □ Not in District or Landmark □ Does Not Require Review □ Requires Review
		٧	VITH REQ	UIREMENTS	Action:
I hereby certify that I am the owner of record of authorized by the owner to make this applicatio if a permit for work described in the application areas covered by such permit at any reasonable  See pre-app	n as his authorized agent and I agree to is issued, I certify that the code official hour to enforce the provisions of the co	conform to all applicable 's authorized representation	laws of thive shall hav	is jurisdiction. In addit	ion, ☐ Denied /1 /
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	$  $ $\mathcal{M}$ $\mathcal{P}$
Joel Sherwood					
RESPONSIBLE PERSON IN CHARGE OF WO	PRK, TITLE		<u> </u>	PHONE:	CEO DISTRICT

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