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

Location of Construction:	Owner:	**	Phone: ** 838–5870	Permit No: 0 0 1 1 2 0
Owner Address: 242 Veranda Street	***Tim Higgins Lessee/Buyer's Name:	Phone:	BusinessName:	001120
Contractor Name:	Address:	Phone:		Permit Issued:
Past Use:	Proposed Use:	COST OF WORK \$ 60,000	: PERMIT FEE: \$ 384.00	007 _ 3 2000
Vacant	single family	FIRE DEPT. □ A □ De Signature:	= =	Zone: CBL: R-3 415-A-007
Proposed Project Description:			CTIVITIES DISTRICT (PA.D	Zoning Approval: O K
Appr			pproved pproved with Conditions: enied Date:	Special Zone or Reviews: Shoreland Wetland Flood Zone
Permit Taken By:	Date Applied For:	Sept 27 2000 K	Bute.	☐ Subdivision A Site Plan maj ☐ minor ☐ mm M 20000 186
 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 				☐ Variance ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied
			PERMIT SSUED WENTS	Historic Preservation Not in District or Landmark Does Not Require Review Requires Review
			WITHER	Action:
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 provisions of the code(s) applicable to such permit				tion, ☐ Denied ☐
areas covered by such permit at any reasor	able hour to enforce the provisions of the	code(s) applicable to such p	emn	
		Sept 27 2000		0 156
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	PERMINISUREMENTS 155C
RESPONSIBLE PERSON IN CHARGE OF	WORK, TITLE		PHONE:	CEO DISTRICT 2
	the Demail Back Cross Accessed	Comerc D DW - Direly Deeb	dia Fila duam. Cand Increase.	

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