Location of Construction: 84 + 86, And 98 - Ashley Lane Oceanwoods 0410	- iver Owner:	Phone:	202 21/0	Permit No:
Owner Address:	Lesses/Brysrs Name:	Custom Built Homes of ME892-3149Ver's Name:Phone:BusinessName:		
<u>27 Maid Street, Windham, ME 040</u>		N/A N/A		
Contractor Name: Address: Phone:				Permit Issued:
Custom Built Homes of Maine Not Given Not Given				
Past Use:	Proposed Use:	COST OF WORK:	PERMIT FEE:	-
Vacant	Duplex/Condo	\$ 320,000	\$ 1,944.00	
		FIRE DEPT. Approved	INSPECTION:	—
			Use Group: <i>R</i> -3 Type: 5 B	
			BOCA96 M	Zone: CBL: 423-A-002
		Signature:	Signature: Hoffer.	
Proposed Project Description:		PEDESTRIAN ACTIVITI	ES DISTRICT (P.A.D.)	Zoning Approval: With
Phase III Units 21,22 and 26	. 27	Action: Approved		Special Zone, or Reviews
		Approved with Conditions:		\Box Shoreland \sqrt{A} $\sqrt{1/5/19}$
Z Bldgs		Denied 🗆		
9				Flood Zone Zone X - Fri
		Signature:	Date:	Subdivision
Permit Taken By: KA	Date Applied For:	10-21-99		■ Site Plan maj □minor □mm ⊠ ₩ 199901449
				Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				
2. Building permits do not include plumbing, septic or electrical work.				
				□ Conditional Use □ Interpretation
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa- tion may invalidate a building permit and stop all work				
***Call for Pick Up				
Jenny McCormick 892-3149 X12				Historic Preservation
PERMIT ISSUED WITH REQUIREMENTS				Dean Nat Demine Demine
				□ Does Not Require Review □ Requires Review
				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				
				Date:
	Providence of the 00	ALL		
IGNATURE OF APPLICANTADDRESS:DATE:PHONE:			-	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	PERMIT ISSUED
				,
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE		PHONE:	WITH REQUIREMENTS 2
White-P	ermit Desk Green–Assessor's Ca	nary-D.P.W. Pink-Public File	Ivory Card–Inspector	ub

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