	y of Portland, Maine - Congress Street, 04101	- C			Per	rmit No: 07-1527	Issue Dat	e:	CBL: 431 CO	13001	
Loc	ation of Construction: WATSON ST	Owner Name:	Owner Name:			Owner Address: 75 WATSON ST			Phone: 280-9606		
Bus	iness Name:	Contractor Nam				actor Address Sox 335 Cumb			Phone 20765366	<i>C</i> 1	
Less	SKB Contracting SkB Contracting Phone:					it Type:	eriand		20703300	Zone:	
Single Family Home Si			Proposed Use: Single Family Home with repairs to 20 foot long seawall.			RE DEPT: Approved I		\$0.00 INSPE			
Proposed Project Description: Repair and install 20 foot seawall						Signature: S PEDESTRIAN ACTIVITIES DISTR			Signature: RICT (P.A.D.)		
					Action Approved Approve			proved w	ed w/Condition Denied		
					Signa	ture:			Date:		
Permit Taken By: Date Applied For: 12/28/2007			Zoning Approval								
1.	This permit application does not preclude		Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting Federal Rules.	g applicable State and	Shoreland		☐ Variance			Not in District or Landn			
2.	Building permits do not in septic or electrical work.	nilding permits do not include plumbing, ptic or electrical work.		etland	☐ Miscellaneous			Does Not Require Revie			
3.	Building permits are void within six (6) months of the		☐ Flood Zon		Conditional Us			Requires Review			
	False information may investigate permit and stop all work		Subdivision			☐ Interpretatio			Approved		
			Site Plan			Approved			Approved w/Condition		
				Mino MM	☐ Denied				☐ Denied		
			Date:			Date:		D	ate:		
I ha juris shal	reby certify that I am the over the context of the	owner to make this appliermit for work described	med procation a	as his authorized application is iss	ne prop l agent sued, I	t and I agree t certify that th	o conform to ne code office	o all ap cial's au	pplicable laws othorized repre	of this sentative	
SIG	GNATURE OF APPLICAN			ADDRESS	S		DATE	E	P	НО	

Location of Construction: 75 WATSON ST	Owner Name: REPETA THOMAS J &	Owner Address: 75 WATSON ST	Phone: 280-9606		
Business Name:	Contractor Name: SKB Contracting	Contractor Address: PO Box 335 Cumberland	Phone 207653666	Phone 2076536661	
Lessee/Buyer's Name	Phone:	Permit Type:	•	Zone:	

 Dept:
 Zoning
 Status:
 Approved with Conditions
 Reviewer:
 Ann Machado
 Approval Date:
 01/07/2008

 Note:
 Ok to Issue:
 ✓

1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that

Dept: Building **Status:** Approved **Reviewer:** Tammy Munson **Approval Date:** 01/16/2008

Note: 01/15/08 - rec'd site plan exemption

Comments:

1/7/2008-amachado: Gave siteplan exemption form to planning.

1/15/2008-gg: received granted site exemption with conditions. /gg gave to Tammy

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 PHO

Ok to Issue: