

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

Location of Construction: <b>**101 Veranda Street Portland</b>		Owner: <b>** William/Carolyn Seymour</b>		Phone: <b>773-7510 822-5874</b>		Permit No: <b>990621</b>
Owner Address: <b>SAA</b>		Lessee/Buyer's Name:		BusinessName:		
Contractor Name:		Address:		Phone:		Permit Issued: <b>JUN 15 1999</b> CITY OF PORTLAND
Past Use: <b>Single Family Home Use</b>		Proposed Use: <b>Salon</b>		COST OF WORK: <b>\$</b>		
				PERMIT FEE: <b>\$25.00</b>		Zone: <b>CBL:</b> <b>431-C-031</b>
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		
Proposed Project Description:  <b>Use 2 rooms and bath as a one chair salon. c/u from 2 family to 1 family with home occup.</b>				INSPECTION: Use Group: Type:		Zoning Approval:  <b>Special Zone or Reviews:</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
				Signature: _____ Date: _____		
Permit Taken By: <b>KA</b>		Date Applied For: <b>June 11, 1999 KA</b>		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied
				Signature: _____ Date: _____		

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.
3. 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..

*6/16/99  
talked to  
owner -  
set up  
appnt. -  
will call  
after P  
plumbing  
is done -  
TM*

**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

SIGNATURE OF APPLICANT		ADDRESS:	DATE: <b>June 11, 1999</b>	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				PHONE:

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

CEO DISTRICT

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