

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

Location of Construction: 1 Sealhill St		Owner: Carol A. Page	Phone: 1-874-1453	Permit No: 950817
Owner Address: 1 Sealhill St - Portland, ME 04101	Leasee/Buyer's Name:	Phone:	Business Name:	PERMIT ISSUED Permit Issued: AUG - 7 1995 CITY OF PORTLAND
Contractor Name:	Address:	Phone:		
Past Use: 1-fam dwlg	Proposed Use: 1-fam w half care	COST OF WORK: \$	PERMIT FEE: \$ 25	Zone: CBL: 431-17 Zoning Approval: Special Zone or Reviews: <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"/>
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group <i>R3</i> Type <i>5B</i> <i>BOCA 93</i>	
Proposed Project Description: change of use - from 1-fam to 1-fam w day care		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/>	Signature: <i>[Signature]</i> Date: <i>[Date]</i>	
Permit Taken By: <i>[Signature]</i>	Date Applied For: <i>[Date]</i>			

1. This permit application doesn't 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..

Off Zoning Sr.

PERMIT ISSUED WITH REQUIREMENTS

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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 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]
SIGNATURE OF APPLICANT

ADDRESS:

DATE:

PHONE:

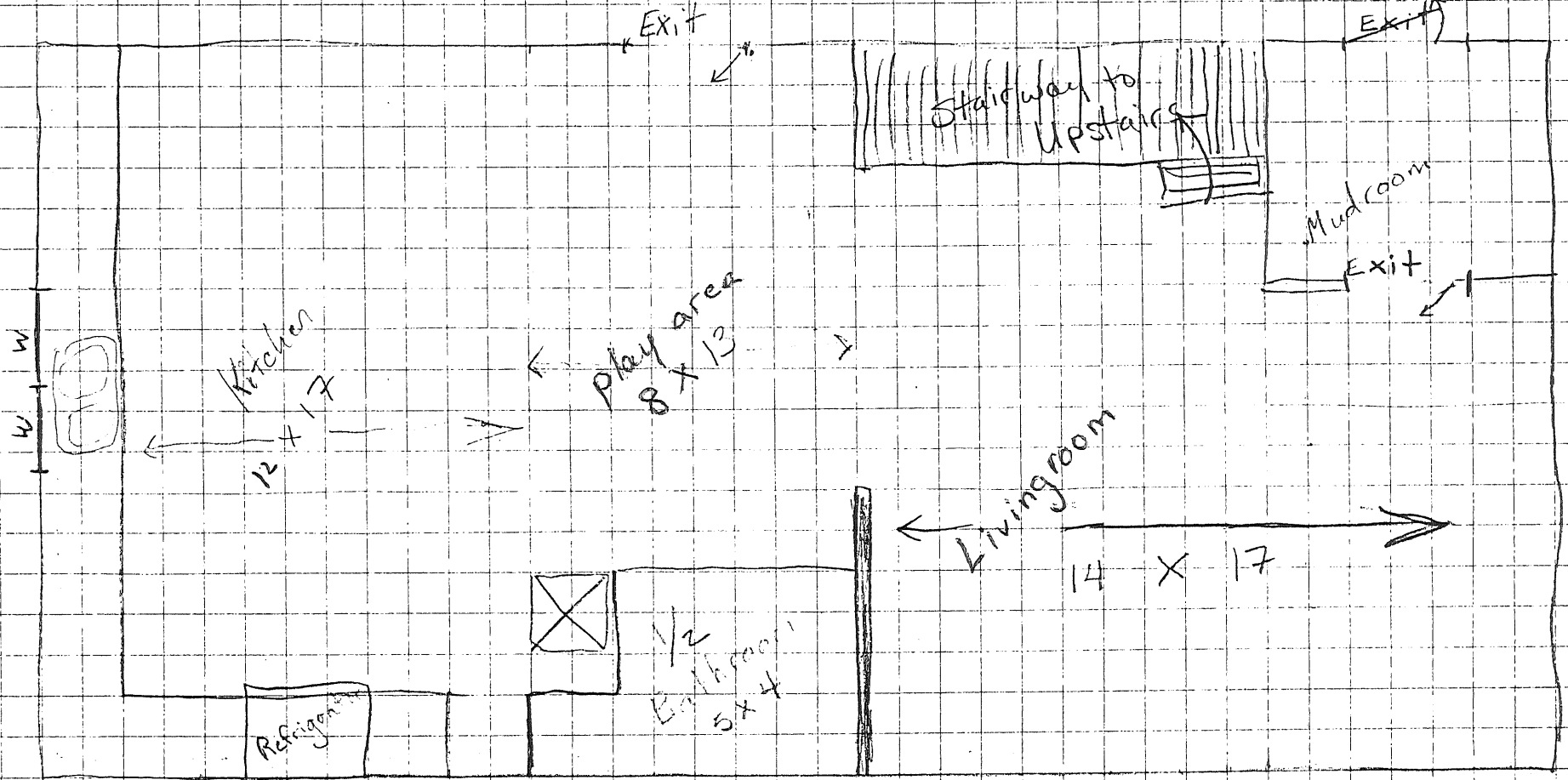
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

CEO DISTRICT

6

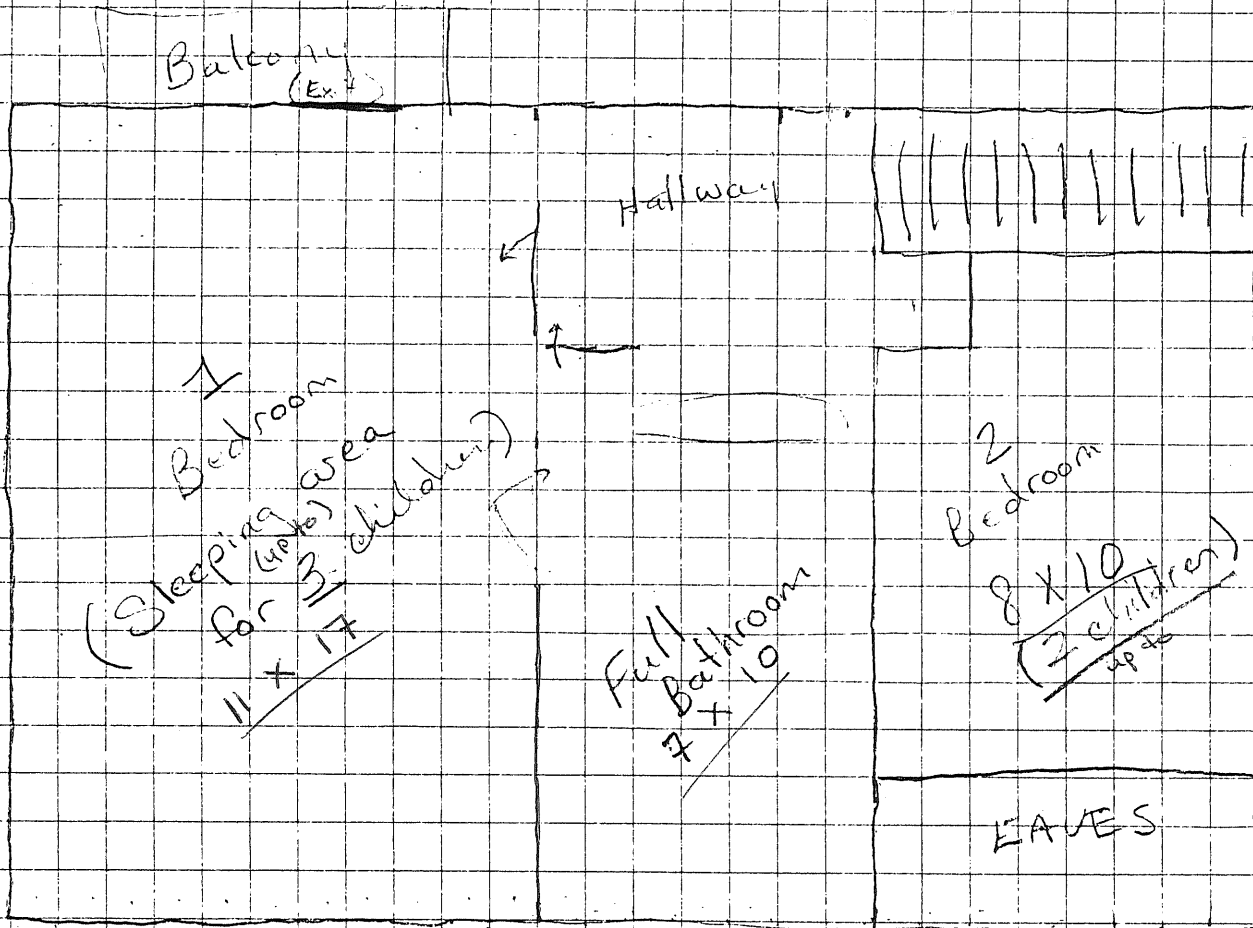
All Areas approximate



1st Floor Floorplan 6 Kendall Street, Portland, ME

Cheyl Page Child care Home

(up to 6 children)



2nd Floor of Floorplan

6 Kendall St, Portland, ME

Cheryl Page: Child Care Home
(up to 6 children)

