Location of Construction: 45 Eastern Prom #7D	Owner: 01ins, Do	onald	Phone:	Permit No 9 8065			
Owner Address: 901 West Outer Dr Oak Ridge 1	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED			
Contractor Name:	Address:	Phone		Permit Issued:			
Monaghan Woodworks							
Past Use:	Proposed Use:	COST OF WOR		JUN 2 2 1998			
	1	\$ 49,500.0	0 \$ 270.00				
Combo		FIRE DEPT.		CITY OF PORTLAND			
Condo			Denied Use Group: R Type: 5				
			BOCAGLI				
		Signature:	Signature:				
Proposed Project Description:			CTIVITIES DISTRICT (P.A.D.)	Zoning Approval: me min			
			Approved	Special Zone or Reviews: 1			
Interior Renovations Unit #71	D		Approved with Conditions:				
incerior kenovacions unit #/h	5		Denied				
			_	\Box Flood Zone \checkmark $b/17/40$			
		Signature:	Date:				
Permit Taken By:	Date Applied For:			□ Site Plan maj □minor □mm □			
MG		11 June 1998					
				Zoning Appeal			
1. This permit application does not preclude the	Applicant(s) from meeting applicable	e State and Federal rules.		□ Variance □ Miscellaneous			
2. Building permits do not include plumbing, se	eptic or electrical work.			Conditional Use			
3. Building permits are void if work is not starte	d within six (6) months of the date of	issuance. False informa-		□ Interpretation			
tion may invalidate a building permit and sto							
	·F ····			Denied			
				Historic Preservation			
				□ Not in District or Landmark			
				Does Not Require Review			
				Requires Review			
				Action:			
	CERTIFICATION						
I hereby certify that I am the owner of record of th		twork is authorized by th	a owner of record and that I have been	□ Appoved □ □ Approved with Conditions			
authorized by the owner to make this application							
if a permit for work described in the application is				,			
areas covered by such permit at any reasonable h				Date:			
areas covered by such permit at any reasonable n	our to emore the provisions of the co	ouc(s) applicable to such	permit				
		une 1998					
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:				
DESPONSIBLE DEDSON IN CHARGE OF WOR			DUCNE	_			
RESPONSIBLE PERSON IN CHARGE OF WOR	N, IIILE		PHONE:				
White_P	ermit Desk Green–Assessor's C	anary-D.P.W. Pink-Pu	blic File Ivory Card-Inspector				
		,		m unis			

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

Additional Plans or Technical Submissions may not be shown in this format.

If you wish to see additional information, Please ask the support staff.

COMMENTS

	729-98 Cherlied frain + sheetroch starting +	
	windating interior unit will add he	me
8/31	Final Inspection OK DC	
	Inspection Record Type	Date

Туре	Date
Foundation:	
Framing:	
Plumbing:	
Final:	
Other:	

 の <p< th=""><th></th><th>g/31 Final Inspection ON</th><th>728-88 Cherled</th></p<>		g/31 Final Inspection ON	728-88 Cherled
Inspection Record Date Foundation:			fram & Sheetroch states & interior unit will all hul

COMMENTS

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