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

Location of Construction:	Owner:		Phone:	Permit No: 9 80925
kon and Martin Parist			:/L=St.J.}	700720
Owner Address: 9	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
	Address:	Phone:		Permit Issued:
Contractor Name:		Filone:		
Past Use:	Proposed Use:	COST OF WORK:	PERMIT FEE:	- AUG I 9 1998
	Toposed ese.	\$ 1,200.06		
	4	FIRE DEPT. DA	<u></u>	CITY OF PORTLAND
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				Zone: CBL: Gulartation
and the second		Signature: -/;	Signature:	<u>NE</u>
Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				Zoning Approval:
Action: Approved				Special Zone or Reviews:
	-1	Ar	pproved with Conditions:	□ Shoreland
with the star entry and	and the second sec	De	enied 🛛	□ Wetland
	1 Contraction of the second			□Flood Zone
		Signature:	Date:	
Permit Taken By:	Date Applied For:	US ADJUY: 1941		Site Plan maj 🗆 minor 🗆 mm 🗆
			· · · · · · · · · · · · · · · · · · ·	Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				
				□ Miscellaneous
2. Building permits do not include plumbing, septic or electrical work.				Conditional Use
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.				Approved Denied
My Ar				Historic Preservation
WITH REALTS CERTIFICATION				D Not in District or Landmark
Rec ^{ard}				Does Not Require Review
				□ Requires Review
The Co				A chiere.
KN .				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,				Denied
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:
		1. the second second		
SIGNATURE OF APPLICANT	ADDRESS:		PHONE:	-
STOTATIONE OF THE DIGHT				
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE		PHONE:	
1841-14 - 19-	with Deck Cross Accesses to Course		in File Ivery Card Increase	
white-Pe	ermit Desk Green–Assessor's Cana		ic rile livory card-inspector	