## 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: Shalom House INc. 780-1084 37 O'Brien Street 001087 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: One Postal Square Portland 04104 Permit Issued: Contractor Name: Phone: Address: 829-5220 \*\*\*\* 4 Orchard Rd Cumberlnad xx ME \*\*\* Todd Wilson COST OF WORK: PERMIT FEE: Past Use: Proposed Use: SEP 2.7 2001 \$ 1,425.00 \$36.00 same **FIRE DEPT.** □ Approved INSPECTION: Use Group #-2 Type 5/2 ☐ Denied Zone: CBL: **1** → 003-I-010 Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland roof over existing deck Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Sept 25 2000 K K **Zoning Appeal** This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance 1. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use □ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work... □ Denied **Historic Preservation** ☐ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: WITH REQUIREMENTS CERTIFICATION □ Appoved 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 ☐ Approved with Conditions □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit sept 25 2000 ADDRESS: PHONE: SIGNATURE OF APPLICANT DATE:

WITH REQUIREMENTS RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector