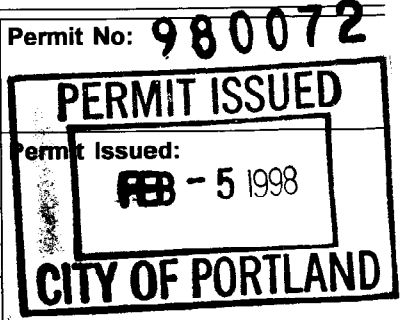


**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 351 Marginal Way		Owner: Stone, Richard		Phone:	
Owner Address:		Lessee/Buyer's Name: Atlantic Kitchen Center		Business Name:	
Contractor Name: Atlantic Kitchen Center/Stephen Vlachos		Address: 351 Marginal Way Portland, ME 04101		Phone: 775-1227	
Past Use: Retail Sales Showroom		Proposed Use: Same		COST OF WORK: \$ 4,000.00	
				PERMIT FEE: \$ 40.00	
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group/Type:	
Proposed Project Description: Make Interior Renovations		Signature:		Signature:	
Permit Taken By: Mary Gresik		Date Applied For: 30 January 1998		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>	



Zone: CBL: 010-H-001

Zoning Approval: 2/3 2/1/98

Special Zone or Reviews:

- Shoreland
- Wetland
- Flood Zone
- Subdivision
- Site Plan maj  minor  mm

Zoning Appeal

- Variance
- Miscellaneous
- Conditional Use
- Interpretation
- Approved
- Denied

Historic Preservation

- Not in District or Landmark
- Does Not Require Review
- Requires Review

Action:

- Approved
- Approved with Conditions
- Denied

Date: \_\_\_\_\_

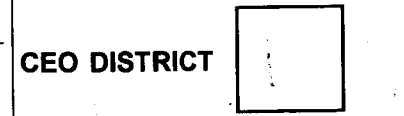
**PERMIT ISSUED WITH REQUIREMENTS**

**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 Stephen Vlachos ADDRESS: \_\_\_\_\_ DATE: 30 January 1998 PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_



COMMENTS

4/21/98 display has been installed tub, sauna  
Lav & toilet.  
Installing mirror now.

Amey

9/16/98 OK. Above

*[Handwritten signature]*

010-H-001

980072

Inspection Record		Date
Type		
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____