

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:		Permit No: 980072	
Owner Address:		Lessee/Buyer's Name: Atlantic Kitchen Center		Phone:		Business Name:	
Contractor Name: Atlantic Kitchen Center/Stephen Vlachos		Address: 351 Marginal Way Portland, ME 04101		Phone: 775-1227		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: FEB - 5 1998 CITY OF PORTLAND </div>	
Past Use: Retail Sales Showrooms		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		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/> Signature: _____ Date: _____		Zone: CBL: 010-R-001 Zoning Approval: 2/5/98 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"/>			
Permit Taken By: Mary Gresik		Date Applied For: 30 January 1998				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

1. This permit application does not 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..

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: _____

CEO DISTRICT



COMMENTS

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

Installing mirror now.
Chung

9/16/98 OK. Above

[Signature]

Inspection Record

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

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

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