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: 229 Congress Street M & R Block 871-9096 Owner Address: PERMIT ISSUED Leasee/Buyer's Name: Phone: BusinessName: Permit Issued: Contractor Name: Address: Phone: Tim Albair DEC - 6 1996 797-8769 195 Lane Avenue, Portland 04103 COST OF WORK: Past Use: PERMIT FEE: Proposed Use: \$25.00 \$1,000.00 Multi family Same w/int reno to FIRE DEPT. Approved INSPECTION: laundry room ☐ Denied Use Group: Type: Zoner 28L BOCA 9 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Approved with Conditions: Int reno to laundry room as per plans □ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: Permit Taken By: ☐ Site Plan mai ☐ minor ☐ mm ☐ Date Applied For: Vicki Dover 11/25/96 **Zoning Appeal** □ Variance This permit application doesn't 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 □ Interpretation 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 Mail to Tim as per above address Action: CERTIFICATION □ Appoved □ Approved with Conditions 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 □ 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 issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at affi/reasonable hour to enforce the provisions of the code(s) applicable to such permit 11/25/96 797-8769 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: Tim Albair RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRIC** 

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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

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