City of Portland, Maine - Bui	_			Permit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Tel:	(207) 874-8703	, Fax: (207) 874-8	716	2013-01981			013 I043001	
Location of Construction: 59 WASHINGTON AVE (75)	NERS LLC	Owner Address: 380 WARREN AVE PORTLAND, ME 04103		, ME	Phone:			
Business Name:	Contractor Name:		Contractor Address:			Phone		
Goodwill Industry	Landry/French Construction Corp mrowell@landryfrenchconstructi		160 Pleasant Hill Road Scarborough ME 04074			n ME	(207) 730-5566	
Lessee/Buyer's Name	Phone:		Permit Type:				Zone:	
jim.demint@goodwillnee.org	` /	(207) 774-6323		Alterations - Commercial			B4 R6	
Past Use:	Proposed Use:	Proposed Use: Same: Retail, Offices, & light		mit Fee: Cost of Work:			CEO District:	
Retail, Offices & Light manufacturing Same: Retail, of manufacturing		_	light \$5,775.00 \$567,999.0 INSPECTION:		99.00	1		
Proposed Project Description:								
Select interior renovations of an existing office space.on the third floor								
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)						
	Action: Approved Approved							
Permit Taken By: Date Applied For:			6			Dat	te:	
	Zoning Approval							
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Review		Zoning Appeal			Historic Preservation	
		Shoreland		☐ Variance	☐ Variance		Not in District or Landmar	
2. Building permits do not include septic or electrical work.	☐ Wetland		Miscella	Miscellaneous		Does Not Require Review		
3. Building permits are void if wor within six (6) months of the date	Flood Zone		Condition	Conditional Use		Requires Review		
False information may invalidate a building permit and stop all work		Subdivision Site Plan		☐ Interpretation			Approved	
	Approve			Approved		Approved w/Conditions		
	Maj Minor MM [_ Denied	Denied		Denied		
	Date:		Date:	Date:		Date:		
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit is shall have the authority to enter all as such permit.	to make this appl for work describe	ication as his authored in the application	at the ized a is issu	proposed work in agent and I agreed aled, I certify that	to conform to a the code officia	all appl al's autl	icable laws of this horized representative	
SIGNATURE OF APPLICANT		ADDRESS			DATE		PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE