## City of Portland, Maine – Building or Use Permit Application 399 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:	f Construction: Owner:		Phone:		Permit No:
the second s		· · ·	and the second		<b>980408</b>
Owner Address:	Lessee/Buyer's Name:	Phone:	Phone: BusinessName:		The second s
				Permit Issued:	
Contractor Name:	Address:	Phone:			Fermit Issued:
		COST OF WOR	W.	DEDMIT FEE.	APR 2 7 1998
Past Use:	Proposed Use:	¢		PERMIT FEE:	AT R 2 1 1000
		\$ 2.10%		\$ = 3.5m	
		FIRE DEPT.ApprovedINSPECTION:DeniedUse Group:Type:			
アライマ 後載のトレビー アウチャラア	इ.स. २० स्तितः १९७७ ४० विद्यासम्बद्धाः र				
					Zone: CBL:
Deserved Design Description		Signature:		Signature:	Zoning Approval:
Proposed Project Description:				ES DISTRICT (P.A.D.)	
			Approved		□ Special Zone or Reviews:
				with Conditions:	□ Shoreland
A strategy second substantian strategy of the trategy of the second se				[	□ □ Wetland
					Flood Zone
		Signature:		Date:	
Permit Taken By:	Date Applied For:				□ Site Plan maj □minor □mm □
					Zaning Anneal
1 This name it and lighting does not marked	- the Applicant(a) from mosting applicable S	tota and Endaral miles			── Zoning Appeal
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.					Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-					□ Interpretation
tion may invalidate a building permit and stop all work.					
					Denied
				0	
			WIT	ERMIT	Historic Preservation
WITH REQUIREMENTS					Not in District or Landmark
				VUIPEDED	□ Does Not Require Review □ Requires Review
			· ·	EMENT	
				surs.	Action:
	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,					n DApproved with Conditions
	ion is issued, I certify that the code official's				11
1 11	ble hour to enforce the provisions of the code	-		2	Date:
	•		-		
				DUONE	_
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF				PHONE:	
RESIDINGIDEL I ERSON IN CHAROE OF WORK, HILE FROME:					
Whit	te–Permit Desk Green–Assessor's Can	ary-D.P.W. Pink-Pu	ublic File	Ivory Card-Inspector	

CBL# 013-M-00] Permit# 980408 COMMENTS Met with Contractor becked will frank theader 5/19/98 -, Mulin Was limbig in hot water heater + sinh uchines, OK mul ed for final bid food server insper indall toilet. Men Held Toilet installe OK **Inspection Record** Type Date Framing: Plumbing: Final: Other: