

Location of Construction: 215 Congress St		Owner: Portland Housing Authority		Phone:	
Owner Address:		Leasee/Buyer's Name:		Phone:	
Contractor Name: * Leach Electric Inc		Address: Box 907 - Gray ME 04039		Phone: 657-5556	
Past Use:		Proposed Use: daycare w fire alarm syst		BusinessName:	
Proposed Project Description: install fire alarm syst		COST OF WORK: \$ 11,000		PERMIT FEE: \$ 75	
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Date:	
Permit Taken By: L Chase		Date Applied For: 12/20/96			

Permit No: **9 6 1 2 4 3**

PERMIT ISSUED

Permit Issued:
DEC 26 1996

CITY OF PORTLAND

Zone: *R-6* CBL: *B-M-015*

Zoning Approval: *[Signature]* 12/23/96

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: _____

1. This permit application doesn't 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 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

Marc Calombeau
SIGNATURE OF APPLICANT ADDRESS: _____ DATE: *12/20/96* PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: _____

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

CEO DISTRICT *[Signature]*
M. Wang

