	y of Portland, Maine -	O			Permit No: 2014-02175	Issue Date:	CBL: 016 D002001	
	Congress Street, 04101	<u> </u>	, Fax: (207) 874-8					
Location of Construction: 118 CONGRESS ST		Owner Name: 118 CONDON	Owner Name: 118 CONDOMINIUMS LLC		Owner Address: 118 CONGRESS ST PORTLAND, ME 04101		, ME	
Busi	ness Name:			<u> </u>				
Lessee/Buyer's Name		Phone:	Phone:		it Type:	Zone:		
D4	Use:	D 1 II		HVAC Permit Fee: Cost of Work:			B1 CEO District:	
	w building under construction	Proposed Use:	Same: First Floor - two (2) retail		\$1,862.00 \$168,000.			
Fir and	st Floor - two (2) retail space I parking with 12 residential ados above.	es spaces and par through Fourth	spaces and parking and Second through Fourth Floors - 12 Residential Condos.		ECTION:	φ100,0	1	
	posed Project Description:	C System.						
		•		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D Action: Approved Approved w/C		P.A.D.)		
						ed w/Conditions Denied		
				S	ignature:		Date:	
Permit Taken By: dmc Date Applied For: 09/18/2014				Zoning Approval				
1.	This permit application does not preclude the		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation	
1.	Applicant(s) from meeting Federal Rules.				☐ Varianc	e	☐ Not in District or Landman	
2.	Building permits do not in septic or electrical work.	☐ Wetland☐ Flood Zone☐ Subdivision		Miscella	aneous	Does Not Require Review		
3.	Building permits are void in within six (6) months of the			Condition	onal Use	Requires Review		
	False information may inverse permit and stop all work			Interpre	tation	Approved		
			Site Plan		Approve	ed	Approved w/Conditions	
			Maj Minor MM		_ Denied		Denied	
			Date:		Date:		Date:	
I ha juri: shal	ve been authorized by the or sdiction. In addition, if a pe	wner to make this appl rmit for work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agreedled, I certify that	to conform to the code offici	the owner of record and tha all applicable laws of this al's authorized representative on of the code(s) applicable to	
SIG	NATURE OF APPLICANT		ADDR	RESS		DATE	PHONE	
RES	SPONSIBLE PERSON IN CHARG	GE OF WORK, TITLE				DATE	PHONE	