City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: Permit No: O Owner: 化硫二基化 有重要的 医电子 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 11 34 7 5t (stabbassa 9t+ Permit Issued: Contractor Name: Address: Phone: APR 1 7 1997 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ CITY OF PORTLAND FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: Type: Zone: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: Confliction Car Connect - configuration office Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: 1 01111 3137 237 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... □ Denied **Historic Preservation** □Not in District or Landmark APPEAL SUSTAINED 3/20/97 ☐ Does Not Require Review □ Requires Review 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 is issued, I certify that the code official's authorized representative shall have the authority to enter all Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

PHONE:

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE