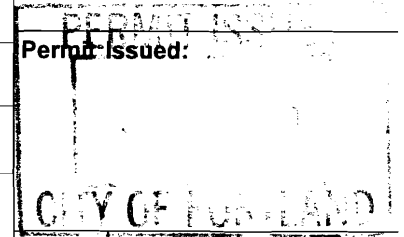


City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 2 Atlantic Street		Owner: Sherwood Hamill		Phone: 775-5004		Permit No: 3000	
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: ** S. Hamill Furniture **		Address: 273 Congress Street Portland		Phone: 775-5004		Permit Issued:	
Past Use: xx 3 unit		Proposed Use: same		COST OF WORK: \$ 48,000		PERMIT FEE: \$ 312.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group A2 Type 5B 00CA99 Signature: <i>[Signature]</i>	
Proposed Project Description: Re-build garage and Addition to apartment		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: K		Date Applied For: June 5 2000 K		Signature:		Date:	



Zone: R-6 CBL: 016-F-011
 Zoning Approval: *OK 6/2/00*
 Special Zone or Reviews: *w/conditg*
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied
 3-family of per m...
 Zoning Appeal

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 is 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

June 5 2000

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review
 Action:
 Approved
 Approved with Conditions
 Denied
 Date: *[Signature]*

