

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

Location of Construction: 35 W. Commercial St.		Owner: BROOKLYN, NEW YORK CITY		Phone: 212-224-1234		<b>Permit No: 980542</b> <div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>  <b>MAY 28 1998</b>  <b>CITY OF PORTLAND</b> </div>		
Owner Address: N/A		Lessee/Buyer's Name:		Phone:			BusinessName:	
Contractor Name: BROOKLYN, NEW YORK CITY		Address: 100 W. Commercial St. Portland, ME 04101		Phone:				
Past Use:		Proposed Use:		<b>COST OF WORK:</b> \$ 1,000.00 <b>PERMIT FEE:</b> \$ 40.00			<b>INSPECTION:</b> Use Group: A-3 Type: 50 Signature: <i>[Signature]</i>	
				<b>FIRE DEPT.</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature:			Signature: <i>[Signature]</i>	
Proposed Project Description: Install new curb, lights (1000) and window replacement (1000) at 35 W. Commercial St.				<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: Date:				
Permit Taken By: <i>[Signature]</i>		Date Applied For: <i>[Date]</i>						

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.
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..

## 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 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

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	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

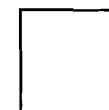
- Zoning Appeal**
- ☐ Variance
  - ☐ Miscellaneous
  - ☐ Conditional Use
  - ☐ Interpretation
  - ☐ Approved
  - ☐ Denied

- Historic Preservation**
- ☐ Not in District or Landmark
  - ☐ Does Not Require Review
  - ☐ Requires Review

- Action:**
- ☐ Approved
  - ☐ Approved with Conditions
  - ☐ Denied

Date: \_\_\_\_\_

CEO DISTRICT



PERMIT ISSUED  
WITH REQUIREMENTS

## COMMENTS

6/98 checked framing for sheetrock OK  
to close in smtg

9/11/04 Closed  
@ Home

## Inspection Record

Type

Date

Foundation: \_\_\_\_\_

\_\_\_\_\_

Framing: \_\_\_\_\_

\_\_\_\_\_

Plumbing: \_\_\_\_\_

\_\_\_\_\_

Final: \_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_