

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

Location of Construction: 61 St. Lawrence St Owner Address:		Owner: Ted Arnold/V. Lambert		Phone: 761-4053		Permit No: <b>970737</b>
		Lessee/Buyer's Name:		BusinessName:		
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>                  Permit Issued:  <b>JUL 14 1997</b>  <b>CITY OF PORTLAND</b> </div>
Past Use:  3 unit		Proposed Use:  same with addition		COST OF WORK: \$12,000.00 PERMIT FEE: \$ 80.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: Type: Signature: <i>[Signature]</i> Signature: <i>[Signature]</i>		
Proposed Project Description:  construct addition as per plans		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		Zone: R-6 CBL: 16-E-15 Zoning Approval: <i>3 families oil Per micro jobs</i> 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"/> <i>7/11/97</i>		
Permit Taken By:  Vicki Dover		Date Applied For:  22 5/23/97				

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..

Call owner for P/U

**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

SIGNATURE OF APPLICANT: *[Signature]* Ted Arnold  
 ADDRESS: 61 St Lawrence St  
 DATE: 03 July 1997  
 PHONE: 761-4053

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

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

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

**Action:**  
 Approved  
 Approved with Conditions  
 Denied

Date: 5/22/97

*[Signature]*

CEO DISTRICT 1

*[Handwritten]*