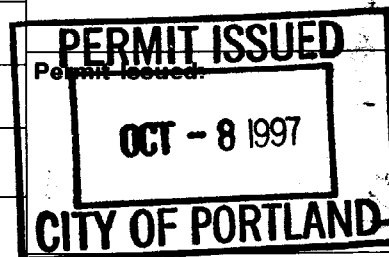


City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 58 Fore St		Owner: XXXXXXXX The Portland Company		Phone:		Permit No 971074	
Owner Address: SAA Fld, ME 04101		Lessee/Buyer's Name: USM		Phone:		BusinessName:	
Contractor Name:		Address:		Phone:			
Past Use: Mix Use		Proposed Use:		COST OF WORK: \$		PERMIT FEE: \$ 25.00	
				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: Conduct Event - Art Display 26 Sept 97 - 27 Sept 97				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>			
Permit Taken By: Mary Cresik		Date Applied For: 23 September 1997					



Zone: **17** CBL: **018-A-001**

Zoning Approval: *[Signature]*

Special Zone or Reviews:

☐ Shoreland
☐ Wetland
☐ Flood Zone
☐ Subdivision
☐ Site Plan maj ☐ minor ☐ mm ☐

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: *9/20/97*

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 *Phineas Sprague* ADDRESS: DATE: **23 September 1997** 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

CEO DISTRICT



COMMENTS

Completed A.C.

97-0174

018-A-001

Inspection Record	
Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____