City of Portland, Maine – Buildin	ig or Use Permit Applica	Lion 389 Congress	Street, 04101,	Tel: (207) 87	74-8703, FAX: 874-8°	716
Location of Construction:	Owner:	reserve Co.	Phone:		Permit No: 9 8 0 0 1 1	
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:		PERMIT ISSUED	
Contractor Name:	Address:		76.2~3		Permit Issued: JAN - 7 1998	
Past Use:	Proposed Use:	COST OF WORK		`⊍.0°		
* \$ 2.40 t 3	8528	FIRE DEPT. ☑ 7.	Approved INSPECT		CITY OF PORTLAN	D
		Signature:	Signatu	a more St. mily market market in the second of	Zone: CBL: (Call	(-1)
Proposed Project Description:		PEDESTRIAN A	TVITIES DIST	RICT (P.A.D.)	Zoning Approval:	
libradi ipatokiet ijster	A	Action: Approved [Approved with Conditions: Denied [Approved [Approved with Conditions]]			ws: 🦩	
		Signature:	Da	te:	☐ Subdivision☐ Site Plan maj ☐minor ☐	_
Permit Taken By:	Date Applied For:	in uncenter the:	in the value 1501			Jmm 🛘
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. Building permits do not include plumbing, septic or electrical work. 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 					☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied	
			PERMIT ISS WITH REQUIRE	SUED MENTS	Historic Preservatio □ Not in District or Landn □ Does Not Require Revie □ Requires Review	nark
					Action:	
I hereby certify that I am the owner of record of the authorized by the owner to make this application if a permit for work described in the application areas covered by such permit at any reasonable has been application.	as his authorized agent and I agree s issued, I certify that the code offic	sed work is authorized by the to conform to all applicable ial's authorized representation	laws of this jurisdic we shall have the aut	tion. In addition,	□ Denied	ns
		To PA	resber 1997			
SIGNATURE OF APPLICANT 19 % 1/2 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1	r: Pitte PADDRESS:	DATE:	PHONE	:	-	
RESPONSIBLE PERSON IN CHARGE OF WOL	RK, TITLE		PHONE	: 1	CEO DISTRICT	
White-F	ermit Desk Green-Assessor's	Canary-D.P.W. Pink-Put	olic File Ivory Ca	d-Inspector		