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

Location of Construction:	Owner:		Phone:	Permit No:
		Dhons		0 81 164
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	
Contractor Name:	Address:	Phone:		- Company Contraction -
duudila,	•			
Past Use:	Proposed Use:	COST OF WORK	: <b>PERMIT FEE:</b> \$ 36.440	<b>OCT</b> 9 19.
		FIRE DEPT. 🗹 A	pproved INSPECTION:	OT DODTLAN
states - Altar Chara	e e de construcción			CITY OF PORTLAN
		Signature: 1	Signature: 1.1	
Proposed Project Description:	·		TIVITIES DISTRICT (P.A.D.)	Zoning Approval:
			pproved $\Box$	Special Zone or Reviews:
is the conclusion of States Baseline Stould Factories			pproved with Conditions:	□ Shoreland
ം പറ്റ്റം പെട്ടാത്തിയ പറിച്ചും മാത്തം		D	enied 🗆	
		Signature:	Date:	☐ Flood Zone □ Subdivision
Permit Taken By:	Date Applied For:		Date.	☐ Site Plan maj ⊡mino
Date Applied For. a control 1, 1720				
1 This newsite and institute does not an allocate the Analizantia biogeneration and institute and Federal multi-				── <b>Zoning Appeal</b> □ Variance
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.				Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				
tion may invalidate a building permit and stop all work				□ Approved □ Denied
				Historic Preservation
PERMIT				□Not in District or Landmark □Does Not Require Review
PERMIT ISSUED WITH REQUIREMENTS				□Requires Review
			QUIREMENTO	
			-11/3	Action:
CERTIFICATION				□ Appoved
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				Date:
areas covered by such permit at any reasonable no	ur to enforce the provisions of the code(s	b) applicable to such p	ermit	
	. 6			
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
e a se se se				
RESPONSIBLE PERSON IN CHARGE OF WORK	X. TITLE		PHONE:	
White-Per	rmit Desk Green–Assessor's Canar	y–D.P.W. Pink–Pub	lic File Ivory Card-Inspector	

## COMMENTS

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bottles + del - bld 1 with O 304 has Znd Story down omo 101 beino. Drockosc Front Ference removes Kenna ر ہ 615