

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

Location of Construction: 273 Congress St		Owner: East End Studios		Phone:		Permit No: 980006	
Owner Address:		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Sentry Protective Systems		Address: 536 Riverside St Ptld, ME		Phone: 04103 797-7799		<div style="border: 2px solid black; padding: 5px;"> PERMIT ISSUED Permit Issued: JAN - 6 1998 CITY OF PORTLAND </div>	
Past Use: Art Studios/Mix Use		Proposed Use: Same		COST OF WORK: \$ 1,687.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied			
Proposed Project Description: Install Fire Alarm System				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____			
Permit Taken By: Mary Gresik		Date Applied For: 19 December 1997					

Zoning Approval: *OK S 12/19/97*
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: 12/19/97
DA

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

William F Lamson
 SIGNATURE OF APPLICANT Bill Lamson ADDRESS: DATE: 19 December 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 1
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