			_		
ocation of Construction: 247 Congress St Jane Sawyer		Phone: 772-6579			Permit No: 981090
247 Congress St Owner Address:	Lessee/Buyer's Name:	Phone:	Busines		
P.O. Box 7225 Ptld, ME 04112	Lessee/Buyer's Name.	I none.	Dusines	sivanie.	PERMIT ISSUED
Contractor Name:	Address:	Phone	 :		Permit Issued:
MXMXXXXXXXXX H.H. Sawyer Real	lty				SEP 2 9 1998
Past Use:	Proposed Use:	COST OF WORK	K:	PERMIT FEE:	
		\$ 25,000.	00	\$ 145.00	OT DODTI AND
Mix Use	Same	FIRE DEPT.	Approved	INSPECTION:	<b>CITY OF PORTLAND</b>
6-fam 2-Comm			Denied	Use Group <b>R-2</b> Type: 5/	
			14.	BOCA96100	Zone: CBL: $021-F-009$
Proposed Project Description:			tyny	Signature: Hoffen	Zoning Approval: Dueztou
Proposed Project Description.	PEDESTRIAN ACTIVITIES DISTRICT (P,A,D.)				
	Action: Approved			Special Zone of Reviews: 19	
Complete rehab of burned out ap	Approved with Conditions:				
fixtures and 6 entrance fire do	Dors	Demed			Detland to Pemein
		Signature:		Date:	□ Subdivision 2-Com
Permit Taken By:	Date Applied For:			Dute.	☐ Site Plan maj Eminor ⊡mm □
MG		22 SEpt 98			
					Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.					□ Variance □ Miscellaneous
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-					□ Interpretation
tion may invalidate a building permit and stop all work					
	77 15				Denied
Callfor P/U 772-6579					Historic Preservation
Car /					□Not in District or Landmark
					Does Not Require Review
	NULL STATS				CRequires Review
				ENTS	Action:
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					Date:
areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit					
		22 Sept 98			_
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:				PHONE:	
White-Pe	rmit Desk Green–Assessor's C	anary–D.P.W. Pink–Pu	blic File	Ivory Card-Inspector	ARIDC -
					11/14

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