	y of Portland, Mai Congress Street, 04		U			ŀ	07-0122	Issue Dat	e:	023 E01	0001	
Location of Construction: Owner Name				Tun. (207) 07 1 0710		Owner Address:					Phone:	
35	DIAMOND ST		GLICKMAN ALBERT B & JUDITH			9864 WILSHIRE BLVD						
Business Name:			Contractor Name: Main Gas			Contractor Address: 908 Roosevelt Trail Windham				Phone 207892674	14	
			Phone:	Phone:			mit Type: anks - Commerc		Zone:			
Past Use: Proposed Us						Permit Fee:		Cost of Work: CE		CEO District:	1	
Commercial				nstall 500 gallon		\$35.00		\$	\$35.00 1			
			Propane tank		FIR		Approved Denied	Use Gro		Type		
Pro	posed Project Descripti	on:										
	tall 500 gallon Propan					Signature: S			Signatur	Signature:		
							PEDESTRIAN ACTIVITIES DISTRIC			CT (P.A.D.)		
						Acı	tion Approx	ved App	proved w/	Condition	Denied	
						Sig	nature:			Date:		
Permit Taken By: Date Applied For: 1dobson 02/05/2007						Zoning Approval						
				Special Zone or Revie			ews Zoning Appeal			Historic Preservation		
1.	This permit application does not preclud Applicant(s) from meeting applicable Sta Federal Rules.		•				☐ Variance			☐ Not in District or Landn		
2.	Building permits do not include plumbing, septic or electrical work.			Wetland			Miscellaneous			☐ Does Not Require Revie		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flood Zon			Conditional Us			Requires Review		
False information may invalidate a bui permit and stop all work			a building	Subdivision			☐ Interpretatio			Approved		
				Site Plan			Approved		Approved w/Condition			
				Maj 🗌 Mino 🗌 MM			Denied			☐ Denied		
						Date:			Da	Date:		
I ha juri: shal	reby certify that I am to we been authorized by sdiction. In addition, i Il have the authority to uch permit.	the owner to f a permit fo	o make this appli r work described	med procession a	as his authorized application is iss	ne pr l age sued	ent and I agree t , I certify that th	o conform to	to all app cial's aut	olicable laws horized repre	of this sentative	
SIC	SNATURE OF APPLICAN	1			ADDRESS	3		DATE		P	НО	

Location of Construction:	Owner Name:	Owner A		Phone:		
35 DIAMOND ST Business Name:	GLICKMAN ALBER Contractor Name:		ILSHIRE BLVD tor Address:	Phone		
business Name:	Main Gas		osevelt Trail Windham	2078926744		
Lessee/Buyer's Name	Phone:	Permit T Tanks	Type: - Commercial	Zone	::	
Don't Zan's Charles	. D I'	D	A	ID-4		
Dept: Zoning Status: Note:	: Pending	Reviewer:	Approva	Ok to Issue:	]	
Dept: Building Status:	: Pending	Reviewer:	Approva	Approval Date:		
Note:				Ok to Issue:	]	
		CERTIFICATION				
I hereby certify that I am the owner I have been authorized by the owne jurisdiction. In addition, if a permit shall have the authority to enter all	er to make this application t for work described in the	roperty, or that the propos as his authorized agent ar application is issued, I ce	nd I agree to conform to all a rtify that the code official's a	applicable laws of this authorized representati		
to such permit.					ive	