

Location of Construction: 211 Marginal Way		Owner: Marginal Way Properties		Phone:	
Owner Address:		Lessee/Buyer's Name:		Phone:	
Contractor Name: Les Wilson & Sons		Address: POBox 1028, Westbrook 04098		Phone: 854-4583	
Past Use:		Proposed Use:		COST OF WORK: \$	
				PERMIT FEE: \$ 10.00	
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
		Signature: <i>[Signature]</i>		Signature:	
Proposed Project Description: remove underground 1,000 gal fuel tank		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
		Signature:		Date:	

Permit No: 971084

PERMIT ISSUED

Permit Issued:
OCT - 9 1997

CITY OF PORTLAND

Zone: CBL:
24-C-1

Zoning Approval:
[Signature] 10/1/97

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

Permit Taken By: Vicki Dover Date Applied For: 10/1/97

- 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..

Mail to contractor

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

[Signature]
SIGNATURE OF APPLICANT Ron Wilson/Contractor ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

Action:
 Approved
 Approved with Conditions
 Denied

Date: *[Signature]*

CEO DISTRICT

COMMENTS

10-24-97 Inspected Met with
Mechanical Services Tech Tank has not
yet been removed. null;

8/16/98 or call

97-0184
024-C-001

Inspection Record		Date
Type		
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____