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

Location of Construction:

Location of Construction: 157 Fox St	Owner: The Carbo	Co.	Phone:	Permit No: 0 9 0 0 2 7
Owner Address:	Lessee/Buyer's Name: Rent-A-Center	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name: Timothy Albair	Address: 229 Congress St. Portland 04101 Phone:			Permit Issued:
Past Use: Retail	Proposed Use: Same	COST OF WORK \$ 450.00 FIRE DEPT. ☑ A	pproved INSPECTION: Use Group: Type:	CITY OF PORTLAND
Proposed Project Description:		Signature:	Signature: Asset	<u> </u>
Interior Renovations as pe	r plans	Action: A	TIVITIES DISTRICT (A) A.D. pproved pproved with Conditions: enied	Special Zone or Reviews:  Shoreland Wetland Flood Zone
		Signature:	Date:	☐ Subdivision
Permit Taken By: SP	Date Applied For:	uary 7 <b>,</b> 1999		☐ Site Plan maj ☐minor ☐mm ☐  Zoning Appeal
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>				☐ Variance ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied
		V	PERMIT ISSUED WITH REQUIREMENTS	Historic Preservation  Not in District or Landmark Does Not Require Review Requires Review 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit				ion, Denied
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE		PHONE:	CEO DISTRICT
WhiteP	ermit Desk Green–Assessor's C	anary-D.P.W. Pink-Pub	lic File Ivory Card–Inspector	14/2/1.