City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 9 9 0 02 Location of Construction: Owner: Phone: The Corps (). 157 10 5 50 PERMIT ISSUED Lessee/Buyer's Name: Owner Address: Phone: BusinessName: energy Coulor Permit Issued: Phone: Contractor Name: Address: JAN 1 2 1999 Minerally License well Congrets bt. Portion of PAPI **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: 35 30 6 \$ 450.00 FIRE DEPT. 🗹 Approved INSPECTION: Use Group: Type: 33 ☐ Denied CBL: Zone: BOCA 96 10 4 1 5 m Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAD.) ស្រុកម្មវិស្ស៊ី ស្រាស្លាស់ស្រុកស្រុក ស្រុកស្នាស់ស្នាធិបាល Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Denied □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 我们还完整的一点。 重性放射 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□Interpretation □ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation ☐ Not in District or Landmark □ Does Not Require Review PERMIT ISSUED WITH REQUIREMENTS ☐ Requires Review Action: CERTIFICATION ☐ Appoved 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 □ Approved with Conditions □ Denied 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 ADDRESS: DATE: PHONE: SIGNATURE OF APPLICANT 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