	y <b>of Portland, Mai</b> Congress Street, 041		~		~ ~		06-0404	Issue Date	:	024 D0	01001	
Location of Construction:			Owner Name:			ᆜ	Owner Address:			Phone:		
160 FOX ST			PORMAN ONE 2004 LP			600 CONGRESS AVE STE 400						
Business Name: Lessec/Buyer's Name			Contractor Name:			Contractor Address:			Phone			
			CM & B Construction Mgmt & B		Mgmt & Buil	6 Kimball Lane Lynnfield				7812469400		
			Phone:			Permit Type: Additions - Commercial			Zone:			
Past	Use:		Proposed Use:		<u> </u>	느	rmit Fee:	Cost of Wor	k: CI	EO District:	7	
Commercial			Commercial/ i	10' x 60'		\$30.00	\$1,00		1	1		
			Temporary Trailor			Denied Use Gro			INSPECT	ION:		
									Use Group	Dup: 15-M OType:		
									/	TTRAKER		
						See Conditions Signature: Grea Curs Signat			41/	13/000		
_	posed Project Description:			4	r	// ,	471	$\chi$				
install a 10' x 60' Temporary Trailor						Signature:						
						Action: Approved Approved w/Co				onditions Denied		
Permit Taken By: Date Applied For:				<u> </u>		Signature:				Date:		
Idobson   03/29/2006				Zoning Approval					H			
<u> </u>	This permit application does no Applicant(s) from meeting appl Federal Rules.			Special Zone or Revie		ws	WS Zoning Appeal  Variance		$\overline{}$	Historic Preservation		
1.			•						l	Not in District or Landmark		
2.	Building permits do not include plumbing, septic or electrical work.			Wetland			Miscellaneous			Does Not Require Review		
3. Building permits are void if wor within six (6) months of the date			of issuance.	FI	Flood Zone		Conditional Use			Requires Review		
	False information may permit and stop all wor	a building	Subdivision			☐ Interpretation			Approved			
				Site Plan			Approved			Approved w/Conditions		
				Maj Minor MM		Denied			Denied			
Date					4/50/0	Date:	Date: Da		rate:			
						,						
					CERTIFICATI	ΟN						
I ha juris shal	reby certify that I am the ve been authorized by the sdiction. In addition, if a I have the authority to en permit.	ne owner to a permit fo	make this appl r work describe	med proication and in the	operty, or that the as his authorized application is is	ne p d ag ssue	ent and I agree t d, I certify that t	o conform he code of	to all appl ficial's aut	licable laws horized repr	of this resentative	
SIGNATURE OF APPLICANT				ADDRESS		DATE			PHONE			
RES	SPONSIBLE PERSON IN CH	ARGE OF W	ORK, TITLE				<del> </del>	DATE		РНО	NE	