City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No Location of Construction: 161 Marginal Way Owner: Phone: Southern Maine Properties 04102 772-6404 BYRXBYN Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 5 Milk Street Portland 04101 Permit Issued: Phone: Address: Contractor Name: Portland Diversified Services Thompson's Point Portland 04102 MAY 2 4 1998 COST OF WORK: PERMIT FEE: Proposed Use: Past Use: 25,000 \$ 145,00 FIRE DEPT. □ Approved INSPECTION: Abandoned Bldg Unknown ☐ Denied Use Group: Type: (Commercial) CBL: 025-B-004 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved with Conditions: Demolish 4 story Commercial Bldg. Denied П □ Wetland ☐ Flood Zone **7** ☐ Subdivision Signature: Date: ☐ Site, Plan_mai Dm/nor Permit Taken By: Date Applied For: SP 5-20-99 □ 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** Call for Pick Up Not in District or Landmark 828-0920 Does Not Require Review □ Requires Review Action: PERMIT ISSUED **CERTIFICATION** CERTIFICATION WITH REQUIREMENTS 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 ☐ Appoved □ Approved with Conditions 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. □ Denied 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 5-21-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE:

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE