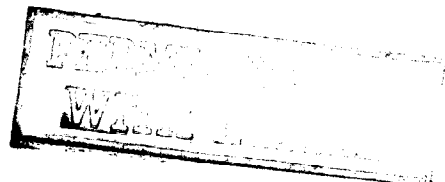


**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <b>107 Elm St AKA 185 Lancaster St</b>		Owner: <b>Arrow Realty</b>	Phone:	Permit No: <b>970923</b>
Owner Address: <b>198 Lancaster St Pctd, ME 04101</b>	Lessee/Buyer's Name:	Phone: <b>772-6032</b>	BusinessName:	<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>                  Permit Issued:  <b>AUG 26 1997</b>  <b>CITY OF PORTLAND</b> </div>
Contractor Name:	Address:	Phone:		
Past Use: <b>Office</b>	Proposed Use: <b>Same</b>	COST OF WORK: <b>\$ 12,000.00</b>	PERMIT FEE: <b>\$ 80.00</b>	
Proposed Project Description: <b>Make Interior Renovations</b>		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	Zone: <b>B3</b> CBL: <b>025-F-001</b>
		Signature: <i>[Signature]</i>		Zoning Approval: <i>[Signature]</i> 9/26/97 <b>Special Zone or Reviews:</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		
Permit Taken By: <b>Mary Gresik</b>	Date Applied For: <b>22 August 1997</b>	Signature:	Date:	

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..



**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 OF APPLICANT **Doug Cardente** ADDRESS: DATE: **22 August 1997** PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: *[Signature]*

*[Signature]*

CEO DISTRICT 2

*[Signature]*

COMMENTS

12/24/97 Completed AR

97-0923  
OAS-F001

Inspection Record

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