

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

Location of Construction: 203 Oxford Street		Owner: October Corp.		Phone: 775-7915 x254		Permit No: 000266	
Owner Address: n/a		Lessee/Buyer's Name: n/a		Phone: n/a		Business Name: n/a	
Contractor Name: None at this time		Address: n/a		Phone: n/a		Permit Issued: APR - 3	
Past Use: City Shelter		Proposed Use: Same		COST OF WORK: \$ 21,000		PERMIT FEE: \$ waived	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: A-   Type: 5-B BOCA 99	
Proposed Project Description: Replacing handicap ramp, upgrade fire alarm system, doors, replace rear stairs.		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>		Zone: <i>R-10</i> CBL: 026-B-010	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		Zoning Approval: <i>OK with conditions 4/3/00</i>	
Permit Taken By: KA		Date Applied For: 3-29-00		Signature: _____ Date: _____		<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"/>	

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..

Call Cliff \*775-7915 x 254  
for pick up

**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

3-29-00

SIGNATURE OF APPLICANT ADDRESS: DATE: 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]*

**PERMIT ISSUED WITH REQUIREMENTS**