## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: 761-2072 197-201 Oxford Street October Corp Qwner Address: Lessee/Buyer's Name: Phone: BusinessName: City of Portland Shelter Contractor Name: Phone: Address: \*\*\* \*\* 221 Virginia Street Portland | COST OF WORK: \*\*David Dipietro MAR 13 PERMIT FEE: Past Use: \$2,500 42.00 shelter FIRE DEPT. Approved INSPECTION: same Use Group: R-Type: 50 ☐ Denied **Zone: CBL**: 026-B-018 CBL: BOCA 90 Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. Action: Approved Special Zone Approved with Conditions: ☐ Shoreland Construction of 2 kakkxxxxxxxxxx bathrooms Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: K March 9 2000 K 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. 2. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied **Historic Preservation** PERMIT ISSIJED WITH REQUIREMENTS ☐ Not in District or Landmark □ Does Not Require Review ☐ Requires Review Action: **CERTIFICATION** □ Appoved ☐ Approved with Conditions 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 □ 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 March 9 2000 SIGNATURE OF APPLICANT ADDRESS: PHONE: DATE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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