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: Permit No: . . i + . . . i / . 1976 Carlord Armer Without the ser Qwner Address: Lessee/Buyer's Name: Phone: BusinessName: City of Artiface Significa-Contractor Name: Address: Phone: **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: \$ 4. 1. 65 800 FIRE DEPT. Approved INSPECTION: Use Group R- Type 53 ☐ Denied Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (VA.D.) Approved Action: Special Zone or Reviews: Approved with Conditions: Court contiet of the hear rooms □ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 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 □ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation □ Not in District or Landmark □ Does Not Require Review ☐ Requires Review Action: **CERTIFICATION** ☐ Appoved 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 ☐ Approved with Conditions □ 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 SIGNATURE OF APPLICANT ADDRESS: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE: