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: 980423 3 2 8 2 3 2 2 1 4 5 1 4 4 5 4 4 4 5 4 4 5 4 5 5 6 6 6 6 5 5 673-9503 Owner Address: Lessee/Buyer's Name: BusinessName: Phone: 12 believer in a star ger Address: Phone: Contractor Name: 18 17 No. 18 20 12 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: APR 2 9 1998 100 35.00 **FIRE DEPT.** □ Approved INSPECTION: 1- 1- 13 \$ - 1 June 1 1 ☐ Denied Use Group: Type: Zone: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Denied □Wetland Track of Barrie Walls ☐ Flood Zone □ Subdivision Signature: Date: Date Applied For: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Just Laplante 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. ☐ 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 T4 ...(5) **Historic Preservation** □ 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 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 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: DATE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

Other: