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: 277 Turbers was now Fortist of the Court Class Leasee/Buver's Name: Owner Address: Phone: BusinessName: Box Clark LIT capacitions have Post & law or - Car. 64101 674-1663 Contractor Name: Phone: wwwar Arcaresulate, Systems DEC 1 9 1996 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 30,000,00 170.00 FIRE DEPT. —Approved INSPECTION: Appreciation Focalate Cabe ☐ Denied Use Group: Type: Figure of course for their Person opening Zone: CBL: Signature: Signature: Zonina Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. Action: Approved Special Zone or Reviews: Approved with Conditions: □ Shoreland install placeurs lift Denied П □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: aban tras &. If Medicalist 1496 Zoning Appeal □ Variance This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. □ Conditional Use 3. 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 Historic Preservation □ Not in District or Landmark Toes 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 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 It imagester is no were and the second SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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