## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Phone: Location of Construction: Owner: 273 Cumberland Ave Andrews, David Lessee/Buyer's Name: Phone: Owner Address: BusinessName: Permit Issued: Contractor Name: Address: Phone: P.O. Box 131 Oxford, ME 04270 743-2924 Michael Henderson NOV | 2 1997 **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: \$ 6,000.00 \$ 50.00KXNNNXNN FIRE DEPT. Approved INSPECTION: Multi Fam Same ☐ Denied Use Group: Type: Zone: CBL: 026-F-015 Signature: Zoning/Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Special Zone or Review Approved with Conditions: Install Fire Alarm System ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Mary Gresik 07 November 1997 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 ☐ Interpretation 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 Line 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 07 November 1997 SIGNATURE OF APPLICANT Michael Hendrson ADDRESS: DATE: PHONE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector