

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 443 Congress St. 4th floor & Partial 3rd Fl.		Owner: Estate of Mary J.E. Clapp Fl.	Phone: 772-8806	Permit No: 000040
Owner Address: 443 Congress Street		Lessee/ Buyer's Name Stroudwater Technologies	Phone: N/A	BusinessName: N/A
Contractor Name: **Sidney St. F. Thaxter, Esquire Trustee		Address: One Canal Plaza, 10th Fl. P.O. Box 7320, Ptld, ME 04112		Permit Issued: 20
Past Use: Office	Proposed Use: Same	COST OF WORK: \$ 100,000	PERMIT FEE: \$ 624.00	Zone: B3 CBL: 027-B-002 Zoning Approval: <i>[Signature]</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> <i>1/19/2000</i>
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: 2B <i>BOC 296</i> Signature: <i>[Signature]</i>	
Proposed Project Description: Office Fit Up to 4th Floor and partial 3rd floor.		Signature: <i>[Signature]</i> Date: _____		
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Signature: _____ Date: _____		
Permit Taken By: UB	Date Applied For: 1-18-00			

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

Please Send TO:

Sidney St. F. Thaxter, Esquire, Trustee
One Canal Plaza, 10th Floor
P.O. Box 7320
Portland, Maine 04112

**PERMIT ISSUED
WITH REQUIREMENTS**

CERTIFICATION

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, 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

SIGNATURE OF APPLICANT	ADDRESS:	DATE: 1-18-00	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

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

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action: *Any ext work Reg. A Sep. Review*

Approved
 Approved with Conditions
 Denied

Date: _____

**PERMIT ISSUED
WITH REQUIREMENTS**

CEO DISTRICT **1**
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