Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

| Please Read Application And | CITY OF PORTLAND | | PERMIT ISSUED | 7 |
|--------------------------------|------------------------------------|------------|------------------------------|---|
| Notes, If Any, Attached | | Permit Nur | nber: 070651 JUL 1 1 2007 | |
| This is to certify that_ | CITY OF PORTLAND /Lur Construction | | | _ |
| has permission to | Plaza Restoration | | CITY OF PORTLAND | _ |

ion a

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and

Apply to Public Works for street line

ification of inspan on must on and when permonent on process or the inspan of the inspan on the inspan of the insp

ine and of the

e of buildings and

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

epting this permit shall comply with all

uctures, and of the application on file in

ances of the City of Portland regulating

027 C012001

and grade if nature of work requires such information.

OTHER REQUIRED APPROVALS

Fire Dept. Vrea Cuss

AT 389 CONGRESS ST

this department.

Health Dept.

Appeal Board
Other

Department Name

PENALTY FOR REMOVING THIS CARD



| City of Portland, Maine - Bu | _ | | | Issue Date: | 027 (| C012001 | |
|--|--|---|---|--------------------------------------|---|-----------------------------|--|
| 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) | | , rax: (207) 874-873 | · · · · · · · · · · · · · · · · · · · | | Phone: | 027 C012001 | |
| Location of Construction: 389 CONGRESS ST Owner Name: CITY OF POR | | RTLAND | Owner Address: 389 CONGRESS ST | | rnone: | | |
| Business Name: | Contractor Name | | Contractor Address: | | Phone | | |
| | ł | Lumus Construction | | 175 Lancaster St Suite 208F Portland | | 1 | |
| Lessee/Buyer's Name Phone: | | | Permit Type: | | Zons: 2 | | |
| , | | | Alterations - Con | mmercial | | トドフ | |
| Past Use: Proposed Use: | | | Permit Fee: Cost of Wor | | CEO District | CEO District: | |
| City Hall Plaza | City Hall Plaz | a - Plaza Restoration | \$4,410.00 \$438,500. | | .00 1 | | |
| | | | FIRE DEPT: Approved Denied | | INSPECTION: Use Group: A-Z Type: N/K Stair Reconstruction | | |
| | | | } | | Stair Recon. | struction | |
| Proposed Project Description: | | | _ | | \\ | 2/1 | |
| Plaza Restoration | | | Signature (wcc. | | Signature. | 2//11/07 | |
| | | | PEDESTRIAN ACT | IVITIES DISTI | RICT (P.A(D.) | A(D.) | |
| | | | Action: Appro | ved [] Appro | oved w/Conditions [| Denied | |
| | | | Signature: | | Date: | Date: | |
| | Applied For: | | Zoning | g Approval | | | |
| ldobson 06 | /04/2007 | | | | | | |
| 1. This permit application does n | • | Special Zone or Revi | ews Zoni | ng Appeal | Historic P | Historic Preservation | |
| Applicant(s) from meeting applicable State and Federal Rules. | | Shoreland | [] Variance | | Not in Di | Not in District or Landmar | |
| 2. Building permits do not includ septic or electrical work. | Building permits do not include plumbing, septic or electrical work. | | Miscellaneous | | Does Not | Does Not Require Review | |
| 3. Building permits are void if w within six (6) months of the da | Flood Zone | Conditional Use | | Requires | Requires Review | | |
| False information may invalidate permit and stop all work | Subdivision | [] Interpretation | | Approved | | | |
| | | Site Plan | Approv | ed | | w/Conditions | |
| PERMIT ISS | Maj Minor Minor | Denied | | Denied | Denied | | |
| JUL 1 1 20 | 07 | Date: 640 | Date: | | Date: 6 2 | 007 | |
| | | ı | / | | D. An | drus | |
| CITY OF PORTL | AND | | | | | | |
| | | CERTIFICATI | ON | | | | |
| hereby certify that I am the owner have been authorized by the owne urisdiction. In addition, if a permit shall have the authority to enter all a such permit. | r to make this applition for work describe | ication as his authorized in the application is i | d agent and I agree ssued, I certify that | to conform to | all applicable lav | ws of this epresentative | |
| SIGNATURE OF APPLICANT | | ADDRES | S | DATE | | HONE | |

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE