

Location of Construction: 11 Free St		Owner: Thomas Bureau		Phone:	
Owner Address: 11 Free St		Leasee/Buyer's Name: 01191		Phone:	
Contractor Name:		Address:		Phone:	
Past Use: office bldg		Proposed Use: office bldg + inter renovations		<b>COST OF WORK:</b> \$ 3500 <b>PERMIT FEE:</b> \$ 10 <b>FIRE DEPT.:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <b>INSPECTION:</b> Use Group: Type:	
Proposed Project Description: interior renovations		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)</b> Action: Approved <input type="checkbox"/> Approved with Conditions: <input checked="" type="checkbox"/> Denied <input type="checkbox"/> Signature: Date:		<b>Signature:</b> Signature:	
Permit Taken By: Chase		Date Applied For: 6/17/96			

Permit No: **960678**

**PERMIT ISSUED**

JUL 12 1996

**CITY OF PORTLAND**

Permit Issued:

Zone: CBL: 27-F-26

Zoning Approval:

**Special Zone or Reviews:**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: \_\_\_\_\_

1. This permit application doesn't 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..

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 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:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

CEO DISTRICT

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