

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

Location of Construction: 292 Congress Street		Owner: Oak Leaf Terrace Co.		Phone:		Permit No: 991035
Owner Address:		Lessee/Buyer's Name:		Phone:		
Contractor Name: ** Nelson & Small Inc. David R. Fortin		Address: 212 Canco Road, Ptd, ME 04104		Phone:		Zone: B-2 CBL: 028-D-003
Past Use: Laundromat		Proposed Use: Same		COST OF WORK: \$ 6,000		
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B Type: 5B BOCA 96 Signature: <i>Hoffman</i>
Proposed Project Description: Equipment replacement - addition of 2 tanning rooms only.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>				Signature: _____ Date: _____		
Permit Taken By: UB		Date Applied For: 9-15-99				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied

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..

***Send To: David R. Fortin
Nelson & Small Inc.
212 Canco Road
Portland, ME 04104

**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

9-15-99

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ 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

CEO DISTRICT

UB

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