City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: *** 157 Middle Street Portland 04101 *** Wellin & Co 879-5422 Lessee/Buyer's Name: **60 Minute Photo Phone: Owner Address: BusinessName: Exchange St PORTLAND Me. Contractor Name: Permit Issued: Address: Phone: Fills Proposed Use: **COST OF WORK:** PERMIT FEE: Past Use: \$ 26.88 FIRE DEPT. □ Approved INSPECTION: 519799 Commercia1 same ☐ Denied Use Group: Type: Zone CBL: BOC496 1 028-K-003 Signature: Signature: Holling Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (1)(A.D.) Action: Approved Special Zone or Reviews Approved with Conditions: ☐ Shoreland Side Walk Sign Denied □Wetland ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Κ. Aug. 4, 1999 K. Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. □ Interpretation □Approved tion may invalidate a building permit and stop all work... ☐ Denied **Historic Preservation** □ Not in District or Landmark PERMIT ISSUED ☐ Does Not Require Review WITH REQUIREMENTS ☐ Requires Review Action: CERTIFICATION ☐ Appoved 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 □ Approved with Conditions 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, ☐ Denied 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 Aug. 4, 199 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

PHONE:

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CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE