City	of Portland, Maine	- Building or Use l	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-					2013-02786		029 D003001
	on of Construction:	Owner Name:	. ,	Owner Address:		Phone:	
111 COMMERCIAL ST		BLANCHARI	BLANCHARD BLOCK LLC		PO BOX 7626 PORTLAND, ME 04112		(207) 773-8842
Business Name:		Contractor Name	Contractor Name:		actor Address:	Phone	
Lessee/Buyer's Name Phone:		Phone:			Permit Type: Additions - Commercial		Zone:
Past Us	e:	Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:		CEO District:
Commercial Office Space		Commercial O	Commercial Office Space		\$3,020.00 \$300,000.00 2 INSPECTION:		
_	ed Project Description:						
	ormers/ skylights and de t elevation) to upper floo	•	of Commmercial				4.B.)
					w/Conditions Denied		
			Γ	Signature:		Date:	
Permit Taken By: Date Applied For: 12/24/2013				Zoning Approval			
1. T	This permit application de	oes not preclude the	lude the Special Zone or F		eviews Zoning Appeal		Historic Preservation
	Applicant(s) from meeting rederal Rules.	Shoreland		☐ Varianc	e	Not in District or Landma	
 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started 			Wetland		Miscella		Does Not Require Review
у. И	within six (6) months of trails information may in-	he date of issuance.	f issuance. building Subdivision			onal Use	Requires Review
	ermit and stop all work	_			☐ Interpretation		☐ Approved
			Site Plan		Approv	ed	Approved w/Conditions
			Maj Minor MM		Denied		Denied
			Date:		Date:		Date:
I have jurisdi	been authorized by the oction. In addition, if a pave the authority to ente	owner to make this appl ermit for work describe	ication as his authord in the application	at the rized a is issu	proposed work a gent and I agree ed, I certify that	to conform to al	the owner of record and that Il applicable laws of this I's authorized representative of the code(s) applicable to
SIGNATURE OF APPLICANT			ADDRESS			DATE	PHONE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE