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

Location of Construction:	ation of Construction: Owner:		Phone: 1 16-3		Permit No:
Owner Address:	Lessee/Buyer's Name:	Phone:	Phone: BusinessName:		001229
Contractor Name:	Address:	Phone:		Jermit Issued:	
Past Use:	Proposed Use:	COST OF WORK: PERMIT FEE: \$ 12,509.00 \$152.00		OCT 3 0 2000	
Comaercial	Contro Pel 1	FIRE DEPT. ET A	enied	NSPECTION: Use Group: B Type: 213	Lone: CBL: CBL: 4
Proposed Project Description:		Signature:		DISTRICT (P. D.)	Coning Approval:
laale tenant fit-ap; oop-load b	Action: Approved Approved with Conditions: Denied		<pre></pre>		
		Signature:		Date:	□ Subdivision □ Site Plan maj □minor □mm □
 Permit Taken By: Date Applied For: Octobrate (4, 3000 - 30) 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. 					Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved Denied
Atticition of 173-3613 (Societation workdowner) REPORTING REPORTING Thereby 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					Historic Preservation Not in District or Landmark Does Not Require Review Requires Review Action: Appoved Approved with Conditions Denied Date:
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SIGNATURE OF APPLICANT	ADDRESS:	DATE:]	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE rmit Desk Green–Assessor's Canar	v–D.P.W. Pink–Puh		PHONE:	PERMIT ISSUED CROTIDISTRICT

COMMENTS				
11/9/00 Inspected Framing - OK tockse SB				
2/13/04				
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<u></u>				
Inspection Record Type	Date			
Foundation: Framing:				
Plumbing: Final:				
Other:				