## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 99027 4 Location of Construction: Owner: Phone: Middle St Tower B Associates 100 Middle St Tower B 4th f1 772-8896 Lessee/Buver's Name: Phone: Owner Address: BusinessName: Ptld, ME 04101 XX General Services Administration c/o Liberty Mngmnt 443 Congress St Contractor Name: Address: Phone: 772-8896 443 Congress St Ptld, ME 04101 Liberty Management XXXXXXX COST OF WORK: PERMIT FEE: Past Use: Proposed Use: MAR 3 1 1999 42,000.00 230.00 Office FIRE DEPT. Approved (4th f1) INSPECTION: Same ☐ Denied Use Group: Type: /A Zone: CBL: BOCA96 029-E-026 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Special Zone or Reviews: Approved with Conditions: Renovation of existing offices for use by ☐ Shoreland Denied П □Wetland OSHA & Health & Human Services ☐ Flood Zone Signature: Date: ☐ Subdivision Date Applied For: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: MG 26 March 1999 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐Miscellaneous Building permits do not include plumbing, septic or electrical work. □ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... □ Denied **Historic Preservation** PERMIT ISSUED □ Not in District or Landmark ☐ Does Not Require Review WITH REOURLMENTS ☐ 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 ☐ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 29 March 1999 **SIGNATURE OF APPLICANT** ADDRESS: DATE: PHONE:

PHONE:

**CEO DISTRICT** 

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE