

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

Location of Construction: 1000 1/2 ST. PORTLAND, MAINE 04101		Owner: PORTLAND ARCHITECTURE		Phone: 773-1250		Permit No: <b>990035</b>	
Owner Address: 270 1/2 ST.		Lessee/Buyer's Name: PORTLAND ARCHITECTURE		Phone:		Business Name:	
Contractor Name: PORTLAND ARCHITECTURE CO.		Address:		Phone:		Permit Issued: <b>JAN 14 1999</b>	
Past Use: RESIDENTIAL		Proposed Use: SAME		COST OF WORK: \$ 5000		PERMIT FEE: \$ 65	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
Proposed Project Description: RENOVATION OF 1000 1/2 ST. PORTLAND, MAINE		Signature: _____		Signature: _____		Zone: CBL:	
				Signature: _____		Zoning Approval:	
Permit Taken By: _____		Date Applied For: January 7, 1999		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

**PERMIT ISSUED**  
**JAN 14 1999**  
**CITY OF PORTLAND**

**PERMIT ISSUED WITH REQUIREMENTS**

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: Port City Architects  
71 Federal St.  
Portland ME 04101

**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

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

- Zoning Appeal**
- Variance
  - Miscellaneous
  - Conditional Use
  - Interpretation
  - Approved
  - Denied

- Historic Preservation**
- Not in District or Landmark
  - Does Not Require Review
  - Requires Review

- Action:**
- Approved
  - Approved with Conditions
  - Denied

Date: \_\_\_\_\_

**CEO DISTRICT**