City of Portland, Maine - Buil	ding or Use 1	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel: (2	0			2013-02676		030 D001001
Location of Construction:	0		Owner Address:		Phone:	
68 COMMERCIAL ST - Maine MAINE WHA		RF LLC	PO I	PO BOX 535 BUXTON, ME 04093		3
Business Name:	Contractor Name	ontractor Name:		actor Address:	Phone	
	TBA		Portland ME			
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:
			Alterations - Commercial			WCZ
Past Use:	Proposed Use:		Perm	rmit Fee: Cost of Work:		CEO District:
Marine Uses Building A - Same: M		rine uses - Building A		\$2,020.00	\$200,00	00.00 2
			INSPI	ECTION:		
Proposed Project Description:						
Interior and Exterior Renovations of I						
floor to 15'+ and adding a 3rd story		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
					d w/Conditions Denied  Date:	
Permit Taken By: Date Ap	<u> </u>				Date.	
Permit Taken By: Date Applied For: 12/05/2013			Zoning Approval			
This permit application does not preclude the		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Variance	e	Not in District or Landman
2. Building permits do not include particles or electrical work.	☐ Wetland		Miscella	aneous	Does Not Require Review	
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		Flood Zone		Condition	onal Use	Requires Review
		Subdivision		Interpre	tation	Approved
	Site Plan		Approv	ed	Approved w/Conditions	
	Maj		☐ Denied		Denied	
		Date:		Date:		Date:
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit fo shall have the authority to enter all are such permit.	o make this appl or work describe	ication as his authord in the application	at the rized a is issu	proposed work gent and I agree ed, I certify that	e to conform to a t the code officia	all applicable laws of this al's authorized representative
SIGNATURE OF APPLICANT		ADDI	RESS		DATE	PHONE