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

Location of Construction:	Owner:		Phone: 775-0727	Permit No: 990861
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	9900 T
Contractor Name:	Address: Phone:		Permit issued	
Past Use:	Proposed Use:	COST OF WORK	: PERMIT FEE: \$ 54.30	AUG 1 3 1999
HADE LOUTE	<i>చె 4 బాం</i> ర్ల 	● FIRE DEPT. □ A □ De Signature:	pproved INSPECTION: 5797 41	Zone: CBL: (33)- (-00)
Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAD.)			Zoning Approval:	
Stor walk signa		A	Action: Approved Image: Constraint of the second seco	
	1	Signature:	Date:	□ Subdivision □ Site Plan maj □minor □mm □
Permit Taken By: Date Applied For: Au _k . 10, 1999 k. 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 Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved Denied
	nt har Libby 634 Cape waa Siondist Ham		PERMIT ISSUED WITH REQUIREMENTS	Historic Preservation Not in District or Landmark Does Not Require Review Requires Review Action:
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				Denied
SIGNATURE OF APPLICANT	ADDRESS:	<u>Ασγ. 10, 1939</u> DATE:	PHÓNE:	-
RESPONSIBLE PERSON IN CHARGE OF WORK	K, TITLE rmit Desk Green–Assessor's Canai		PHONE:	