City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: Owner: Permit No: The same of a got of it . 4. Owner Address: BusinessName: Phone: Lessee/Buyer's Name: entre transmission and area to a second rangi je ji ji ka karat Programme is any other Permit Issued: Contractor Name: Phone: 6 % Total . 1.371 **DET 2 6 1999** COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 114,00 \$ 15,00 or the Stout of but butter FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: Type: CBL: (31-0-)5 Zone: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: A Section of the Control of the Cont Approved with Conditions: ☐ Shoreland and take a dillipsel of the Car Denied □Wetland ☐ Flood Zone □ Subdivision Date: Signature: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 1: -13-20 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. □ Conditional Use ☐ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Approved tion may invalidate a building permit and stop all work... or Action Test constraint Pop to ☐ Denied Property the same transfer × 35 (13.0 A. 2) **Historic Preservation** Post words as wall □ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review PERMIT ISSUED WITH REQUIREMENTS Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ 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 11 - 1 2-7" SIGNATURE OF APPLICANT PHONE: ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector