## City of Portland, Maine – Building or Use Permit Application 239 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: Owner Address: BusinessName: Lessee/Buver's Name: Phone: A Company of the Company of the ٧. Contractor Name: Phone: Address: APR 1 5 1998 **COST OF WORK:** Past Use: PERMIT FEE: Proposed Use: **\$**..... FIRE DEPT. Approved INSPECTION: Use Group Type: ☐ Denied CBL: BOC# 9 Zone: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Denied □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: The second second 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 ☐ 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... □ Denied **Historic Preservation** Land to the state of the state □ Not in District or Landmark PERMIT ISSUED □ Does Not Require Review WITH REOUIREMENTS ☐ Requires Review Action: 🕏 ☐ Appoved CERTIFICATION ☐ 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 SIGNATURE OF APPLICANT PHONE: ADDRESS: DATE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Type  Foundation: Framing: Plumbing: Final: Other:			7/8/98 Bas area on pasement livel of. allow	24/97 Met al Mahana 1/98 Pb ok Framon 7/98 Upstries OK
Date				

## CITY OF PORTLAND, MAINE



Department of Building Inspection

## Certificate of Occupancy

## LOCATION

ssued to	ja – Lagaria	Date of Issue			
This is to	certify that the building, premises, o	or part thereof, at the above location, built — alte			
<ul> <li>changed as to understantially to re- occupancy or use,</li> </ul>	se under Building Permit No. quirements of Zoning Ordinance and limited or otherwise, as indicated belo	, has had final inspection, has been found to confe Building Code of the City, and is hereby approved ow.			
PORTION OF BUILDING OR PREMISES		APPROVED OCCUPANCY			
	t VJoer Jenn Jenni	Constitution			
imiting Conditions:		infairgence_man			
his certificate sup ertificate issued	persedes				
pproved:	1 Page 1	Inspector of Buildings			
11 116					