City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 574-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Joseph Soley 375 Fore St. Lessee/Buyer's Name: Phone: Owner Address: BusinessName: Wharf St., Portland Baumann & Co. Phone 9063 Contractor Name: Address: Windham 893-2011 778 Roosevelt Trail Sign A Rama COST OF WORK: PERMIT FEE: Past Use: Proposed Use: 26.20 **FIRE DEPT.** □ Approved INSPECTION: 5/ 9 comm ☐ Denied Use Group: Type: comm BOCA96 Zone: CBL: 032 F 008 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Special Zone or Reviews: 1 2X3 sign Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 4/29/98 Judy Laplante **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. 2. **EP 2 9** 1998 ☐ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation □ Not in District or Landma CERTIFICATION □ Abpoved 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 ☐ Approved 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, Denied 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 a areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 4/29/98 893-2011 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

PHONE:

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE