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

Location of Construction: Elk Street Portland, ME 04101	Owner: ELCI	Phone:	Permit No: 990824
Owner Address: Elk St. Portland, ME 04101	Lessee/Buyer's Name: **Lucian & Ada Trabon	Phone: 753-1588	BusinessName:
Contractor Name:	Address:	Phone:	Permit Issued: PERMIT ISSUED AUG 5 1999 CITY OF PORTLAND
Past Use: Liquor Shop	Proposed Use: Same	COST OF WORK: $	PERMIT FEE: $26.20
		FIRE DEPT. ☐ Approved ☐ Denied Signature:	INSPECTION: Use Group: Type: Signature:
Proposed Project Description: Sidewalk sign		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved ☐ Approved with Conditions: ☐ Denied ☐ Signature: Date:	Zone: B CBL: 032-F-009
Permit Taken By: Sherry	Date Applied For: August 3, 1999		Zoning Approval:

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..

PERMIT ISSUED WITH REQUIREMENTS

Special Zone or Reviews:
- ☐ Shoreland
- ☐ Wetland
- ☐ Flood Zone
- ☐ Subdivision
- ☐ Site Plan maj ☐minor ☐mm ☐

Zoning Appeal
- ☐ Variance
- ☐ Miscellaneous
- ☐ Conditional Use
- ☐ Interpretation
- ☐ Approved
- ☐ Denied

Historic Preservation
- ☐ Not in District or Landmark
- ☐ Does Not Require Review
- ☐ Requires Review

Action:
- ☐ Appoved
- ☐ Approved with Conditions
- ☐ Denied

Date: _____

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

August

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT 1

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