City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: Location of Construction: Phone: Permit No: Q 44 - Carlotte 6 J. 14 - 711 . . . Lessee/Buver's Name: Phone: Owner Address: BusinessName: A service of the contract of the first Permit Issued: Contractor Name: Address: Phone: and the second MAY 1 8 1998 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$190.11 13,00 FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: Type: CBL: Zone: 3. 1-1. Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) regard from some part and fire for the expension Action: Approved Special Zone or Reviews: Some or product, i Approved with Conditions: ☐ Shoreland Denied □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: 13 1 4 4 14 14 14 14 16 1 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 Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation □ Not in District or Landmark □ Does Not Require Review □ Requires Review 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 14 Flor 1298 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: 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

COMMENTS

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