

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

Location of Construction: 1000 State Street		Owner: Joseph Delap		Phone:		Permit No: <div style="font-size: 2em; font-weight: bold;">990766</div> Permit Issued: <div style="border: 1px solid black; padding: 5px; text-align: center;">JUL 20 1999</div> <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">CITY OF PORTLAND</div> Zone: E-2 CBL: 031-V-014	
Owner Address: 1000 State Street Portland 04104		Lessee/Buyer's Name: FISH & CRAB		Phone:			INSPECTION: Use Group: Type:
Contractor Name:		Address:		Phone:			
Past Use: Commercial use		Proposed Use: Retail		COST OF WORK: \$ PERMIT FEE: \$ 60.94			
Proposed Project Description: New 300 sq ft building sign		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____		INSPECTION: Signature: _____			
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied <input type="checkbox"/>			
				Signature: _____ Date: _____			
Permit Taken By: SP		Date Applied For: July 16, 1999 S.				Zoning Approval: Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

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..

*** Call 874-8743 or 775-6054 ***
Toll

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

July 19, 1999

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

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

Zoning Appeal

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

Historic Preservation

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

Action:

- ☐ Approved
- ☐ Approved with Conditions
- ☐ Denied

Date: _____

CEO DISTRICT

