

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

Location of Construction: 25 Temple Street		Owner: Pizzagalli		Phone:		Permit No: 990328	
Owner Address:		Lessee/Buyer's Name: ADECEO		Phone:		Business Name:	
Contractor Name: * Empire Development		Address: P.O. Box W Old Orchard Beach, ME		Phone: 04064 934-7622		Permit Issued: APR 14 1999	
Past Use: Office		Proposed Use: Office Employment Agency		COST OF WORK: \$ 20,000		PERMIT FEE: \$ 120.00	
Proposed Project Description: Interior Renovations 1st, 2nd floor		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B Type: 2A BOCA 96 Signature: [Signature]		CITY OF PORTLAND Zone: B-3 CBL: 032-H-005	
		Signature: [Signature]		Signature: [Signature]		Zoning Approval: OK with conditions 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"/>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: Alan Holt Date: 4.12.99							
Permit Taken By: NG		Date Applied For: 4-1-99					

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 for 170

Send to: Empire Development

PERMIT ISSUED
WITH REQUIREMENTS

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

4-2-99

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: to Deba 4/6/99

CEO DISTRICT

