City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: l Canal Plaza Plaza Realty Co. Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Key Bank Address: Phone: Contractor Name: 282-2400 Barlo Signs 92 Industrial Park Saco, ME 04072 **COST OF WORK: PERMIT FEE:** Past Use: Proposed Use: OCT 2 1008 32.70 INSPECTIÓN: 7/ Bank **FIRE DEPT.** □ Approved Use Group: Type: ☐ Denied Signature: Signature: oning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (B Action: Approved Approved with Conditions: ☐ Shoreland Denied П ☐ Wetland Erect Signage ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: MG 25 September 1998 **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. ☐ Conditional Use ☐ Interpretation Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ 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 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 all Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 28 September 1998 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