## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No:Q **Location of Construction:** Owner: Key &mkmx Corp. One Canal Plaza Lessee/Buyer's Name: Owner Address: Phone: BusinessName: Key Tower, 13th fl., 127 Public Sq. Cleveland Ohio 44114-1306 Contractor Name: Address: Phone: 10 Buttonwood St. So Ptld, ME 04166 \*\*\*Burr Signs COST OF WORK: **PERMIT FEE:** 0 1999 Proposed Use: Past Use: 32.75 Office Same **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: Type: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Reface Existing Sign Approved with Conditions: □ Shoreland Denied □ Wetland ☐ Flood Zone **≺** Date: Signature: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: SP June 3, 1999 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. □ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □ 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 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 ☐ Approved with Conditions 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit June 4, 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

PHONE:

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE