Location of Construction:		Owner:		Phone:	Permit No: 9 80 523
2 Monument Sq	5th floor	Compass Manage		874-0397	and the second se
Owner Address:	Lessee/	Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name:	Address	:	Phone:		Pernit Issued:
Reagan & Company	1	06 Merrill Rd Gray	, ME 04039	657-6353	2 0 1998
Past Use: Proposed Use: COST OF WORK: PERMIT FEE:					
			\$ 42,000.00	\$ 230.00	DE DODTI AND
XXXXX			FIRE DEPT. 🗆 A	pproved INSPECTION:	CITY OF PORTLAND
				enied Use Group: <b>b</b> Type: <b>2</b>	
Office	S	ame	0.	BOCA 96, 01	Zone: CBL: 032-K-001
Proposed Project Description:			Signature:	Signature: THE	Zoning Approval:
Remodeling 8 room	Special Zone of Reviews:				
	I │ □ Shoreland I │ □ Wetland				
				enied E	
			Signature:	Date:	□ Subdivision
Permit Taken By:		Date Applied For:	*****	1/ 1/ 1000	□ Site Plan maj □minor □mm □
			<u>xrrxxxxxxxxxx</u>	14 May 1998	Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.					☐ Variance
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
tion may invalidate a building permit and stop all work					□ Approved □ Denied
				4 A	
				MIT ER	Historic Preservation
	□ Not in District or Landmark				
	□Does Not Require Review □Requires Review				
				WITH REQUIREMENTS	Action:
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					1
areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit					Date:
15 May 1998					
SIGNATURE OF APPLICANT	•	ADDRESS:	DATE:	PHONE:	-
DECONICIPI E DEDCONI IN C			_	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					

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