

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b>	<b>Issue Date:</b>	<b>CBL:</b>
2013-01254		032 L002001

<b>Location of Construction:</b> 1 CITY CTR	<b>Owner Name:</b> ONE CITY CENTER ASSOCIATES LLC	<b>Owner Address:</b> ONE CITY CENTER PORTLAND , ME 04101		<b>Phone:</b>
<b>Business Name:</b> Dirigo Mgmt	<b>Contractor Name:</b> DMC Painting & Remodeling	<b>Contractor Address:</b> 59 Sanford Drive, Suite 3 Gorham ME 04038		<b>Phone</b> (207) 871-1080
<b>Lessee/Buyer's Name</b> Mike Freed; mike@dirigomgmt.com	<b>Phone:</b> (207) 871-1080	<b>Permit Type:</b> Alterations - Commercial		<b>Zone:</b> B3
<b>Past Use:</b> 1st floor retail and food vendors with offices above	<b>Proposed Use:</b> Same: 1st floor retail & food vendors eith offices above	<b>Permit Fee:</b> \$70.00	<b>Cost of Work:</b> \$5,000.00	<b>CEO District:</b> 2
		<b>INSPECTION:</b>		
<b>Proposed Project Description:</b> Installing computer room on 1st level for exist tentant moving existing computer room from 8th to 1st floor. Minimal construction.		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>		
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

<b>Permit Taken By:</b> bjs	<b>Date Applied For:</b> 06/18/2013	<b>Zoning Approval</b>		
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..		<b>Special Zone or Reviews</b> <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"/>  Date: _____	<b>Zoning Appeal</b> <input type="checkbox"/> Variance  <input type="checkbox"/> Miscellaneous  <input type="checkbox"/> Conditional Use  <input type="checkbox"/> Interpretation  <input type="checkbox"/> Approved  <input type="checkbox"/> Denied  Date: _____	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landmark  <input type="checkbox"/> Does Not Require Review  <input type="checkbox"/> Requires Review  <input type="checkbox"/> Approved  <input type="checkbox"/> Approved w/Conditions  <input type="checkbox"/> Denied  Date: _____

**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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

ADDRESS

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

DATE

PHONE