City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: Permit Non R O Owner: (i Owner Address: Lessee/Buver's Name: Phone: BusinessName: A Section of the Labour Said. Permit Issued: Phone: Contractor Name: Address: JUL 16 1998 **COST OF WORK: PERMIT FEE:** Past Use: Proposed Use: \$ 35 44 The same \$ 45.887 ... 1.5 CITY OF PORTLAND FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: Type: CBL: Zone: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: Carried Commencer Control of the Commencer Com Approved with Conditions: ☐ Shoreland Denied □Wetland Sant & was been by ☐ Flood Zone □ Subdivision Date: Signature: Permit Taken By: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: 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. ☐ 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 ាំក្រ សំគ្នា និងសេង និងសេង្ស □ Not in District or Landmark 19 135 5r ☐ Does Not Require Review PERMIT ISSUED ☐ Requires Review Corps & M. Marot WITH REQUIREMENTS 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 □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit SIGNATURE OF APPLICANT DATE PHONE: ADDRESS: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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Inspection Record				
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Foundation:				
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Other:				