Location of Construction:	Owner:		Phone:		Permit No 9 ()	26 5	_										
2 City Center 1st fl		eer Assoc		-4900		20 0											
Owner Address: P.O. Box 1000 York Harbo	Lessee/Buyer's Name: r ME 03911	Phone:		ssName:	PERMIT I	SSUED											
Contractor Name:	Address:	Pho	ne:		Permit Issued:												
Northland Const. Co.		P.O. Box 1517 Kennebunkport ME 04049 **967-			- MR 26	1000											
Past Use: Office	Proposed Use:	COST OF WOL	RK:	PERMIT FEE:		1999											
		\$ 7000	1	\$ 55.00													
	Same	FIRE DEPT.		INSPECTION:	CITY OF PO	RTLAN	D										
			Denied	Use Group: 3 Type			-										
		Signature:	Him	mocrege 101		-P-001											
Proposed Project Description:		PEDESTRIAN		Signature: (A.D.)	Zoning Approval:		e										
		Action:	Approved		1 11-33	125199											
			Approved with Conditions:			r Réviews	í.										
Interior Renovations			Denied	with Conditions: E													
					□ Flood Zone												
		Signature:		Date:			_										
Permit Taken By: SP	Date Applied For:	March 25, 1999			□Site Plan maj I	⊔minor ⊡mr	۱C										
					Zoning Appeal												
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. Building permits do not include plumbing, septic or electrical work. 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 						□ Variance □ Miscellaneous □ Conditional Use □ Interpretation □ Approved											
												. Pr.			Historic Preservation		
											MTH DE MITISCO			□ Not in District or Landmark			
Call for p/u 967-0877						□ Does Not Require Review □ Requires Review											
						"il and	L										
				•	Action:	A	1										
		T			Appoved	124.120	e										
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						V Condition											
authorized by the owner to make this application a		•				conditions											
if a permit for work described in the application is					•												
areas covered by such permit at any reasonable ho				and animity to enter a	Date:												
		March 25, 19	99														
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	-												
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				PHONE:													
18/6/4- 13-	mit Dock Creen Accessor's																

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

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector