City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 991402 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: Permit Issued: Contractor Name: Address: Phone: **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: \$ 1 \$ 14.50 FIRE DEPT. Approved INSPECTION: Use Group Type: 3/3 ☐ Denied CBL: Zone: BOCAdd -Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P/A/D.) Approved Action: Special Zone or Reviews: Approved with Conditions: □ Shoreland Denied \Box □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: ing a second of the second **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 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 Devoga ☐ 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 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 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 ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

COMMENTS

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- 11/100 Command wishes to void permit sould be is not
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Inspection Record		
Туре	Date	
Foundation:		
Framing:		
Plumbing:		
Final:		
Other:		