Location of Construction: 215 Commercial St	Owner:		Phone:	Permit No. 7 0 367
Owner Address:	Granite Face Li Lessee/Buyer's Name:	Phone:	BusinessName:	
Owner Address.		T none.	Businessivanie.	PERMIT ISSUED
Contractor Name:	Address:	Phone	:	Permit Issued:
Granite Face Limited Partner	ship P.O. Box 7626 DTS	Pt1d, ME 0411	2 773-8422/Scott	APR 2 9 1997
Past Use:	Proposed Use:	COST OF WORK	K: PERMIT FEE:	
		\$ 300,000.	<u>.00</u> \$ 1,520.00	OTV OF BODTLAND
Mix Use	Same	FIRE DEPT. 🗖 A	Approved INSPECTION:	CITY OF PORTLAND
			Denied Use Group: B Type: 34	
		a At	ph paco 96	Zone: CBL: 032-V-004
Proposed Project Description:		Signature:	Signature:	Zoning Approval:
Toposed Troject Description.			CHUITIES DISTRICT (PAD.)	A 4/4/4/
			Approved	Special Zone or Reviews.
Interior & Exterior Renovations as per plans		Approved with Conditions:		
Grant Breat & Deer Allitions and all				Flood Zone
Const Front & Rear Additions	is per plans	Signature:	Date:	□ Subdivision
Permit Taken By:	Date Applied For:			☐ Site Plan maj □minor □min û
Mary Gresik		16 April 1997		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
				☐ Miscellaneous
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-				
tion may invalidate a building permit and stop all work.				Approved Denied
			le s	
				Historic Preservation
				□ Not in District or Landmark
				Does Not Require Review
				Action:
				50
CERTIFICATION				☐ ☐ Appoved ↓ 1 □ 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,				
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 provisions of the code(s) applicable to such permit				Date:
1- g2 Exchange street 16 April 1997				
SIGNATURE OF APPLICANT Scott Lindsay ADDRESS: DATE: PHONE:				
Scott A. Lindary				
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:				
	/			
White-Pe	rmit Desk Green–Assessor's Cana	ary-D.P.W. Pink-Pul	blic rile livory Card–Inspector	A P
				11 your

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