Permit No: y 9 Location of Construction: Phone: Owner: 217 Commercial St. Portland 04101 Cyrus Y. Hagge (207) 775-7422Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Sue A. Baillorgeon Permit issued: Contractor Name: Phone: Address: Past Use: **COST OF WORK: PERMIT FEE:** Proposed Use: 1:0 1999 **AAY** \$ \$28<u>.20</u> Vacant Retail Shop Same FIRE DEPT. Approved **INSPECTION:** Use Group: 51 Wee. □ Denied zone: B-3 CBL BOCAG 032-005 Signature: Signature: Zoning Approval: OK Proposed Project Description: **PEDESTRIAN ACTIVITIES DISTRICT () D**.) Action: Approved Special Zone or Reviews: Erect Sign Approved with Conditions: □ Shoreland Denied □ Wetland □ Flood Zone Signature: Date: □ Subdivision □ Site Plan maj □minor □mm □ Permit Taken By: Date Applied For: U.B. May 4th, 1999 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. WITH REQUIREMENTS Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation tion may invalidate a building permit and stop all work... Denied **Historic Preservation** □ Not in District or Landmark Does Not Require Review PLease Call This Number For Pickup - (207) 892-2093 Requires Review Action: / CERTIFICATION Appoved 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 □ Approved with Conditions 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 May 5th, 1999 SIGNATURE OF APPLICANT ADDRESS: PHONE: DATE: **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT** 1 White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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