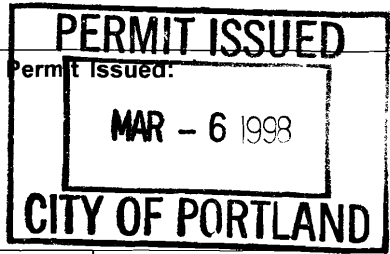


City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 85 Brewer St		Owner: City of Portland		Phone:		Permit No: 980187	
Owner Address:		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: City of Portland		Address: City of Portland		Phone:		Permit Issued: MAR - 6 1998	
Past Use: Retail & Food City Office		Proposed Use: Date:		COST OF WORK: \$		PERMIT FEE: \$	
Proposed Project Description: Alter for pedestrian Area 4 new sidewalk		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:		Zone: CBL: 103-100	
		Signature: [Signature]		Signature:		Zoning Approval:	
Permit Taken By: [Signature]		Date Applied For: 03 March 1998		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Special Zone or Reviews:	
		Action: Approved <input type="checkbox"/>		Approved with Conditions: <input type="checkbox"/>		<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
		Signature: _____		Date: _____		Zoning Appeal	
						<input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	



**PERMIT ISSUED
WITH REQUIREMENTS**

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 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

SIGNATURE OF APPLICANT [Signature] ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: _____

CEO DISTRICT

COMMENTS

3/12/98. Message left for Gary Dolson. *AD*

1/3/01 *Done.*

AD

	Type	Inspection Record	Date
Foundation:	_____	_____	_____
Framing:	_____	_____	_____
Plumbing:	_____	_____	_____
Final:	_____	_____	_____
Other:	_____	_____	_____