City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: Permit No: *4*377 Cumberland Ave. Front Right Corner **Rougla a Christing Sprails 773-4773 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA 8/2 Contractor Name: Address: Phone: MA COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 0 \$ 30.00 hat builtery Same **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: Type: Zone: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) install a life a 7 of Lanuer to from right corner of A. 1.177 Approved Special Zone or Reviews: Approved with Conditions: building. Sammer to be put up Cet. I and taken down Dec. 31st ☐ Shoreland Denied □ Wetland ☐ Flood Zone Date: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 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 3. 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 Anna Send to: Rosaid & Christine Spinella 377 Cumberland Ave. Historic Preservation Portland, the U4101 ☑ Not in District or Landmark ☐ Does Not Require Review □ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS 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 □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 9-9-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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

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