Location of Construction:	Owner:		Phone:	Permit No: 990060
14 Cedar St	Salvation Army		774-6304	770000
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	FERMIT ISSUED
297 Cumberland Ave Ptld				Permit Issued:
Contractor Name: besure SALV. An		Phone		
Roland Chabot yets A copy 14	Minot Ave Auburn,		782-6042	JAN 2 5 1999
Past Use:	Propo sed Use:	COST OF WOR	The second	
2-fam		\$ 15,500.0	A	
2-10	Vacant Land	FIRE DEPT. Approved INSPECTION:		I CITY OF POINT AT 5
	Vacante Bana		Denied Use Group Type:	
			BOCAGLIT	Zone; CBL: 033-N-016
		Signature:	Signature: MAL	
Proposed Project Description:		PEDESTRIAN A	CTIVITIES DISTRICT (P.A.D.)	Zoning Approval:
		Action:	Approved UV	Special Zone or Reviews.
			Approved with Conditions:	\Box \Box Shoreland $1/21/44$
Demolish Structure]	Denied	
				□ Flood Zone
		Signature:	Date:	□ Subdivision
Permit Taken By:	Date Applied For:			□ Site Plan maj □minor □mm I
SP	20	0 January 1999		7
1 This normit amplication does not prealude the	Applicant(a) from mosting applicable Sta	to and Eadaral miles		Zoning Appeal □ Variance
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				
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
tion may invalidate a building permit and stop all work.				
				Denied
	Pro		Historic Preservation	
WITH REQUIREMENTS				Does Not Require Review
			ENTS	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				
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				
				all Date:
areas covered by such permit at any reasonable ho	our to enforce the provisions of the code(s) applicable to such	permit	
	21 Ja	nuary 1999		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TTILE		PHONE:	
W/540 Do	rmit Dock Groop Assessor's Con-		blie File home Cont Inconctor	AR/DC
Wille-re	rmit Desk Green–Assessor's Cana	y-D.F.W. FIIK-PU	unc i ne ivory card-inspector	4 k / N (-

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