

Location of Construction: 150 Preble treet		Owner: Ross Furman		Phone: 775-3000		Permit No: 001298	
Owner Address: SAA *** **		Lessee/Buyer's Name: *****Mouï Chiem		Phone:		BusinessName:	
Contractor Name: *** ** 20 Chesley Street		Address:		Phone:		Permit Issued: NOV 14 2000	
Past Use: COmmercial		Proposed Use: same		COST OF WORK: \$		PERMIT FEE: \$60.66	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B Type: BOCAP Signature: <i>[Signature]</i>	
Proposed Project Description: change of use from office/vacant to seamstress shop signage also		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature:		Date:	
Permit Taken By: K		Date Applied For: Oct 30 2000				Zone: CBL: 033-0-004 Zoning Approval: <i>[Signature]</i> 11/9/00 Special Zone or Reviews: <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"/>	

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.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

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	ADDRESS:	DATE: Oct 31 2000 K	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Appoved
 Appoved with Conditions
 Denied

Date: *[Signature]*

PERMIT ISSUED
WITH REQUIREMENTS

CEOT DISTRICTS 2

CHANGE OF USE PERMIT

THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE PERMIT IS ISSUED

**Building or Use Permit Pre-Application
Attached Single Family Dwellings/Two-Family Dwelling
Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTEIf you or the property owner owes real estate or personal property taxes or user charges on ANY PROPERTY within the City, payment arrangements must be made before permits of any kind are accepted.**

Location/Address of Construction (include Portion of Building): 150 Treble St		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Number	Owner:	Telephone#:
Chart# 033 Block# 0 Lot# 004	Roll Herman ROSS Furman	775-3000
Owner's Address:	Lessee/Buyer's Name (If Applicable)	Cost Of Work: Fee
0	AMOUR CHAPMAN 20 CHESTNUT ST. FORTLAND 04103	\$ 0 Fee \$ 30.00
Proposed Project Description: (Please be as specific as possible) CHANGE OF USE REQUEST from Office to Seamstress BUILDING ADDRESS IS 150 TREBLE ST.		
Contractor's Name, Address & Telephone N/A.		Rec'd By (Signature)
Current Use: VACANT/UNKNOWN.	Proposed Use: SEWING CONTRACTOR.	

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
- All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
- All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
- HVAC (Heating, Ventilation and Air Conditioning) installation must comply with the 1993 BOCA Mechanical Code.

You must Include the following with you application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan/Site Plan **Showing parking spaces**

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

- 4) Building Plans **→ Measurements of floor plan**

Unless exempted by State Law, construction documents must be designed by a registered design professional.

A complete set of construction drawings showing all of the following elements of construction:

- Cross Sections w/Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations -
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

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/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: ms	Date: 10/27/2000
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Building Permit Fee: \$25.00 for the 1st \$1000. cost plus \$5.00 per \$1,000.00 construction cost thereafter.
Additional Site review and related fees are attached on a separate addendum

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Sign Permit Pre-Application

Attached Single Family Dwellings/Two-Family Dwelling Multi-Family or Commercial Structures and Additions Thereto

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTE**If you or the property owner owes real estate or personal property taxes or user charges on ANY PROPERTY within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction (include Portion of Building): 150 Preble St

Total Square Footage of Proposed Structure Square Footage of Lot

Tax Assessor's Chart, Block & Lot Number Chart# Block# Lot# Owner: ROSS Ferman Roy Herman Telephone#: 775-3000

Owner's Address: Lessee/Buyer's Name (if Applicable) MUOI Chiem Total Sq. Ft. of Sign Fee \$30.66

Proposed Project Description:(Please be as specific as possible) Signage build

Contractor's Name, Address & Telephone SAA Rec'd By

Current Use: office/vacant Proposed Use: Seamstress/Sewing

Signature of applicant: m Date: 10-27-2000

Signage Permit Fee: \$30.00 plus .20 per square foot of signage

Ross He need Plat Plan with meas. to property lines also showing parking spaces-

Total Cost 40.66

BUILDING PERMIT REPORT

DATE: 31 OCT. 2000 ADDRESS: 150 Prebde ST. CBL: 033-0-004

REASON FOR PERMIT: Change of use From office TO 'seantress shop/syn'

BUILDING OWNER: Ross Furman

PERMIT APPLICANT: /CONTRACTOR

USE GROUP: B CONSTRUCTION TYPE: CONSTRUCTION COST: PERMIT FEES: 60.66

The City's Adopted Building Code (The BOCA National Building Code/1999 with City Amendments)
The City's Adopted Mechanical Code (The BOCA National Mechanical Code/1993)

CONDITION(S) OF APPROVAL

This permit is being issued with the understanding that the following conditions shall be met: *1, *23, *27, *35

- 1. This permit does not excuse the applicant from meeting applicable State and Federal rules and laws.
2. Before concrete for foundation is placed, approvals from the Development Review Coordinator and Inspection Services must be obtained.
3. Foundation drain shall be placed around the perimeter of a foundation that consists of gravel or crushed stone containing not more than 10 percent material that passes through a No. 4 sieve.
4. Foundations anchors shall be a minimum of 1/2" in diameter, 7" into the foundation wall, minimum of 12" from corners of foundation and a maximum 6' O.C. between bolts.
5. Waterproofing and dampproofing shall be done in accordance with Section 1813.0 of the building code.
6. Precaution must be taken to protect concrete from freezing. Section 1908.0
7. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed.
8. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by fire partitions and floor/ceiling assembly which are constructed with not less than 1-hour fire resisting rating.
9. All chimneys and vents shall be installed and maintained as per Chapter 12 of the City's Mechanical Code.
10. Sound transmission control in residential building shall be done in accordance with Chapter 12, Section 1214.0 of the City's Building Code.
11. Guardrails & Handrails: A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level.
12. Headroom in habitable space is a minimum of 7'6". (Section 1204.0)
13. Stair construction in Use Group R-3 & R-4 is a minimum of 10" tread and 7 1/2" maximum rise. All other Use Group minimum 11" tread, 7" maximum rise. (Section 1014.0)
14. The minimum headroom in all parts of a stairway shall not be less than 80 inches. (6'8") 1014.4
15. Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue.
16. Each apartment shall have access to two (2) separate, remote and approved means of egress.
17. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hour, including fire doors with self closure's. (Over 3 stories in height requirements for fire rating is two (2) hours. (Section 710.0)
18. The boiler shall be protected by enclosing with (1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment. (Table 302.1.1)

10/31

19. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the City's Building Code Chapter 9, Section 920.3.2 (BOCA National Building Code/1999), and NFPA 101 Chapter 18 & 19. (Smoke detectors shall be installed and maintained at the following locations):

- In the immediate vicinity of bedrooms
- In all bedrooms
- In each story within a dwelling unit, including basements

20. A portable fire extinguisher shall be located as per NFPA #10. They shall bear the label of an approved agency and be of an approved type. (Section 921.0)

21. The Fire Alarm System shall be installed and maintained to NFPA #72 Standard.

22. The Sprinkler System shall be installed and maintained to NFPA #13 Standard.

X 23. All exit signs, lights and means of egress lighting shall be done in accordance with Chapter 10 Section & Subsections 1023.0 & 1024.0 of the City's Building Code. (The BOCA National Building Code/1999)

24. Section 25 - 135 of the Municipal Code for the City of Portland states, "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".

25. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act Title 5 MRSA refers, shall obtain a certification from a design professional that the plans commencing construction of the facility, the builder shall submit the certification the Division of Inspection Services.

26. Ventilation and access shall meet the requirements of Chapter 12 Sections 1210.0 and 1211.0 of the City's Building Code. (Crawl spaces & attics).

X 27. All electrical, plumbing and HVAC permits must be obtained by Master Licensed holders of their trade. No closing in of walls until all electrical (min. 72 hours notice) and plumbing inspections have been done.

28. All requirements must be met before a final Certificate of Occupancy is issued.

29. All building elements shall meet the fastening schedule as per Table 2305.2 of the City's Building Code (The BOCA National Building Code/1996).

30. Ventilation of spaces within a building shall be done in accordance with the City's Mechanical code (The BOCA National Mechanical Code/1993). (Chapter M-16)

31. Please read and implement the attached Land Use Zoning report requirements.

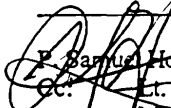
32. Boring, cutting and notching shall be done in accordance with Sections 2305.3, 2305.3.1, 2305.4.4 and 2305.5.1 of the City's Building Code.

33. Bridging shall comply with Section 2305.16.

34. Glass and glazing shall meet the requirements of Chapter 24 of the building code. (Safety Glazing Section 2406.0)

X 35. All signage, shall be done in accordance with Section 3102.0 signs of the City's Building Code, (The BOCA National Building Code/1999).

36. All flashing shall comply with Section 1406.3.10.


 P. Banuel, Building Inspector
 cc: Lt. McDougall, PFD
 Marge Schmuckal, Zoning Administrator

PSH 10/100

**This permit is herewith Issued, on the basis of plans submitted and conditions placed on these plans, any deviations shall require a separate approval.

...THIS PERMIT HAS BEEN ISSUED WITH THE UNDERSTANDING THAT ALL THE CONDITIONS OF THE APPROVAL SHALL BE COMPLETED. THEREFORE, BEFORE THE WORK IS COMPLETED A REVISED PLAN OR STATEMENT FROM THE PERMIT HOLDER SHALL BE SUBMITTED TO THIS OFFICE SHOWING OR EXPLAINING THAT THE CONDITIONS HAVE BEEN MET. IF THIS REQUIREMENT IS NOT RECEIVED YOUR CERTIFICATE OF OCCUPANCY SHALL BE WITHHELD.

******ALL PLANS THAT REQUIRE A PROFESSIONAL DESIGNER'S SEAL, (AS PER SECTION 114.0 OF THE BUILDING CODE) SHALL ALSO BE PRESENTED TO THIS DIVISION ON AUTO CAD LT. 2000, DXF FORMAT OR EQUIVALENT.**

*******CERTIFICATE OF OCCUPANCY FEE \$50.00**

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 150 Treble Street ZONE: B-S

OWNER: Rolf Herman

APPLICANT: Amoui Chiem

ASSESSOR NO. _____

SINGLE TENANT LOT? YES ___ NO ___

MULTI TENANT LOT? YES NO ___

FREESTANDING SIGN? YES ___ NO ___ DIMENSIONS _____

(ex. pole sign. . .)

MORE THAN ONE SIGN? YES ___ NO ___ DIMENSIONS 16 x 30 inches.

BLDG. WALL SIGN? YES NO ___ DIMENSIONS _____ 16 x 30 = 480# = 144 = 3.34#

(attached to bldg)

MORE THAN ONE SIGN? YES ___ NO ___ DIMENSIONS _____

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: 12 x 38 inches.

LOT FRONTAGE (FEET): _____

BLDG FRONTAGE (FEET): 20ft.

AWNING YES ___ NO ___ IS AWNING BACKLIT? YES ___ NO ___

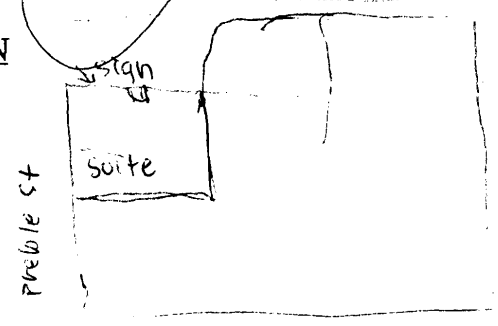
HEIGHT OF AWNING: _____

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT?

*** TENANT BLDG. FRONTAGE (IN FEET) 30 x 2 = 60#

*** REQUIRED INFORMATION

AREA FOR COMPUTATION



A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: [Signature] DATE: 10-26/2000

Attach Insurance

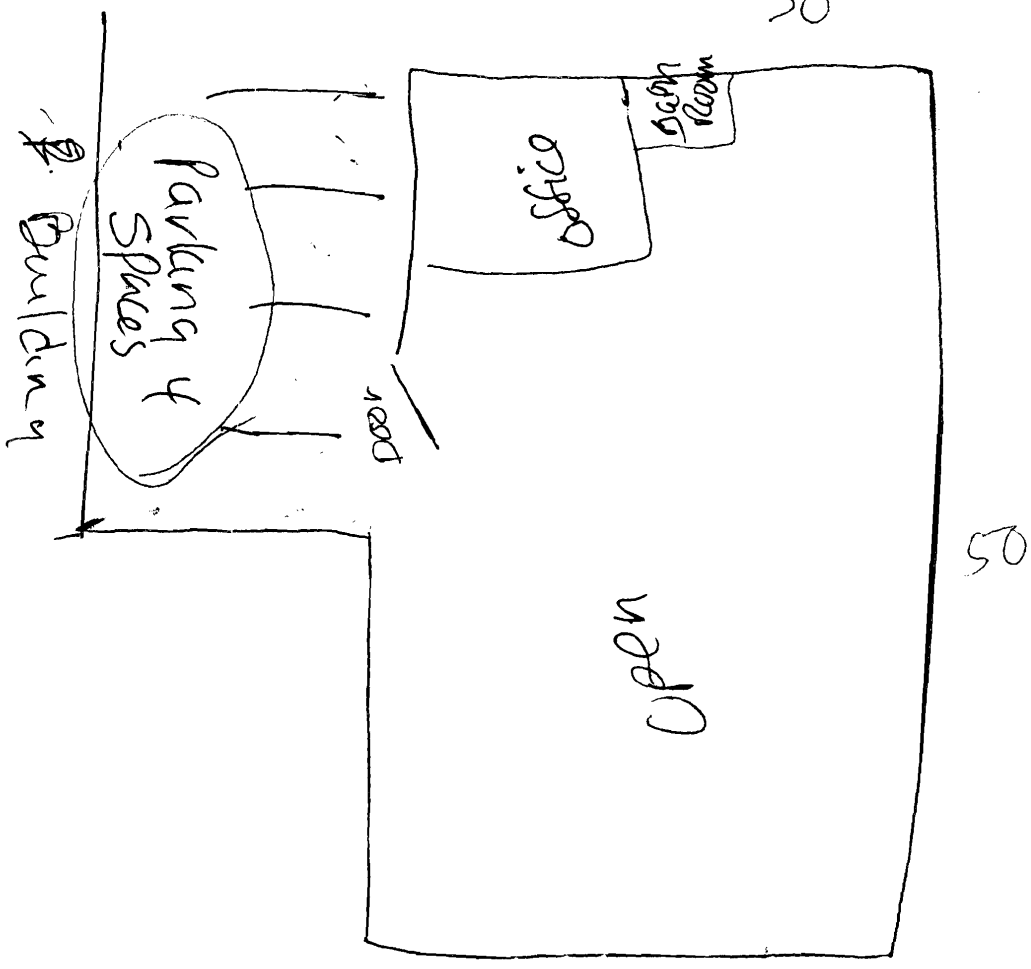
10/27/00

My permission is
granted to put
@ 16" x 30" sign-up
@ 150 Park St. Portland

Ross Y. Furman
ROSS Y. FURMAN
LANDLORD

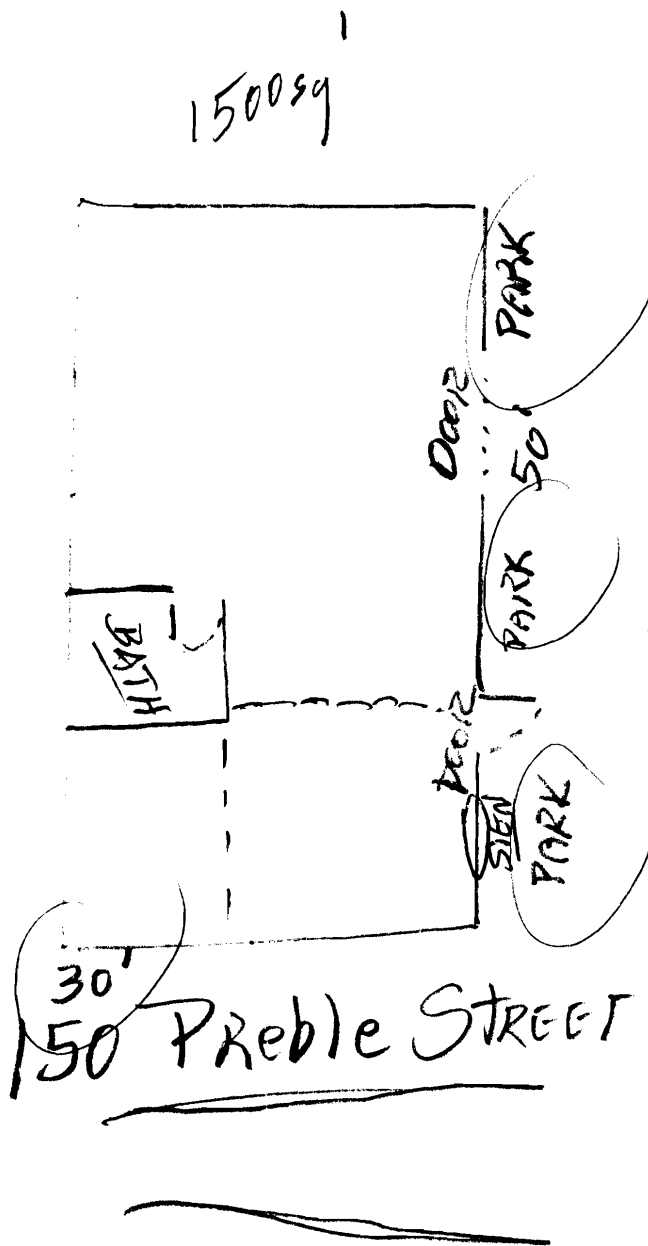
Proble SK

30



$$1500^{\#} = 400 = 4 \text{ seg} \begin{matrix} 3.75 \\ \text{Spac } 6 \end{matrix}$$

4 Show



PARK

PARK

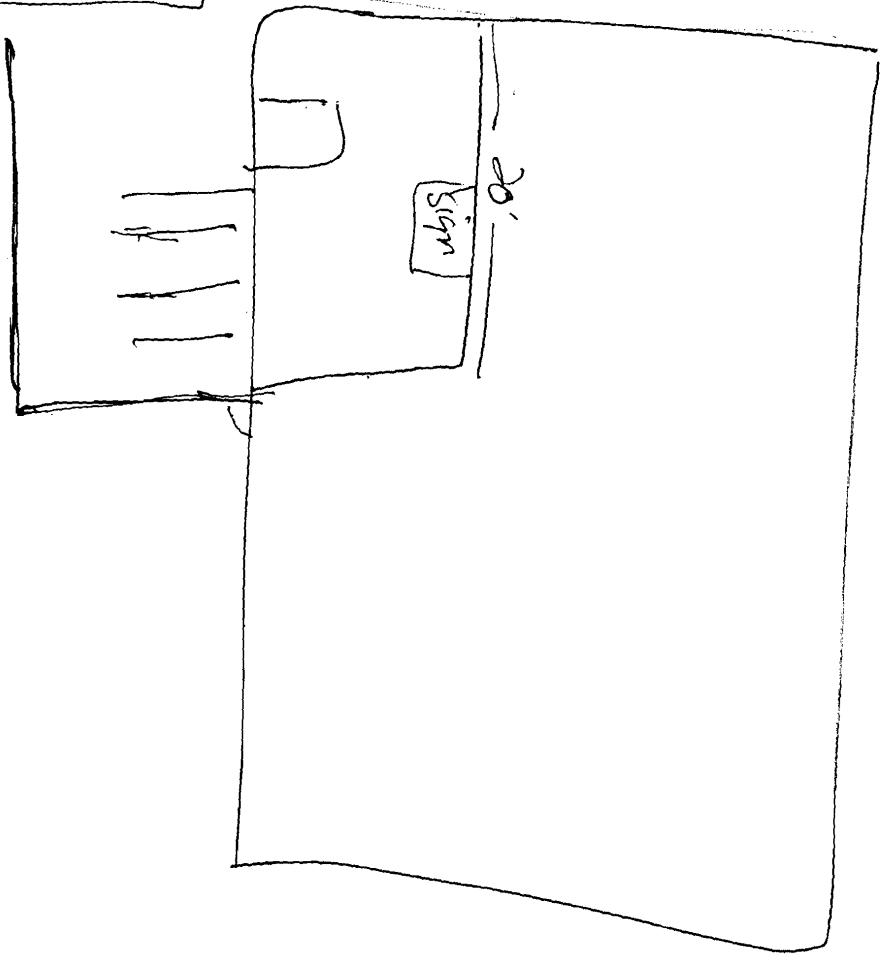
This is diff park
from the other
plan

PARK

10/30/00 ROSSY FURNIAN
715-3000

M. C Sewing

Proble st





STATE FARM INSURANCE COMPANIES

ADD-ON TO STATE FARM PAYMENT PLAN - MONTHLY

APPLICANT'S COPY

MUOI CHIEM
20 CHESLEY AVE
PORTLAND, ME 04103-3615

SFPP Acct No: 0363-5646-28
App Date: 10/27/2000

	Total Premium	37.50
	Net Credit/Charges	.00
	Initial Payment Due	37.50
Payment Received(Cash	40.00)	40.00
	Balance Due	(2.50)

Line	Pol/App Number	Pol/App Mode	Eff Date	Full Term Prem	Monthly Amount	Initial Payment Mos	Premium
F	MERC. BUS. POLICY	AN	10/27/2000	225.00	18.75	02	37.50

--YOUR PAYMENTS MAY VARY--

BUSINESS INSURANCE FOLDER

The Business Insurance Folder contains general information to inform prospective customers about the products and services State Farm offers to business owners and operators. It includes all lines of business insurance.

The Business Insurance Folder can make a business owner or operator aware of different exposures a business faces in day to day operation.

You can personalize the folder with information about yourself and the services your office and staff offer. You can also remove any product brochure that you or the business doesn't want to pursue at this time.

Product brochures include:

- ☞ Property and Liability
- ☞ Auto
- ☞ Life, and
- ☞ Health

Additional space is provided for:

- ☞ Information about your agency
- ☞ A premium quote

Give the Business Insurance Folder to a prospective customer to make them aware of their business insurance needs and the products and services you and State Farm can provide.

When you give a Business Insurance Folder to a prospective business customer, complete a Business Insurance Checkup. Then set an appointment to present a quote for all their business insurance.

Once coverage is provided, offer additional services such as the State Farm Payment Plan, the Car Finance Plan, and your professional counsel. These are some of the extra values that you as a State Farm agent can offer.

CERTIFICATE OF INSURANCE



- STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
- STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois
- STATE FARM FIRE AND CASUALTY COMPANY, Scarborough, Ontario
- STATE FARM FLORIDA INSURANCE COMPANY, Winter Haven, Florida
- STATE FARM LLOYDS, Dallas, Texas

insures the following policyholder for the coverages indicated below:

Name of policyholder CHIEM, MUOI D.B.A. M.C. SEWING

Address of policyholder 150 PREBLE STREET PORTLAND, ME.

Location of operations 04101

Description of operations MAINE

SEAMSTESS

The policies listed below have been issued to the policyholder for the policy periods shown. The insurance described in these policies is subject to all the terms exclusions, and conditions of those policies. The limits of liability shown may have been reduced by any paid claims.

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY (at beginning of policy period)
		Effective Date	Expiration Date	
BINDER 1089-F874	Comprehensive Business Liability	10/27/00	10/27/01	BODILY INJURY AND PROPERTY DAMAGE
This insurance includes:				
<input type="checkbox"/> Products - Completed Operations <input type="checkbox"/> Contractual Liability <input type="checkbox"/> Underground Hazard Coverage <input type="checkbox"/> Personal Injury <input type="checkbox"/> Advertising Injury <input type="checkbox"/> Explosion Hazard Coverage <input type="checkbox"/> Collapse Hazard Coverage <input checked="" type="checkbox"/> EXTERIOR SIGNS LIABILITY INC. <input checked="" type="checkbox"/> EXTERIOR SIGN COVERAGE \$500.00				Each Occurrence \$ 300000 General Aggregate \$ 600000 Products - Completed Operations Aggregate \$
	EXCESS LIABILITY <input type="checkbox"/> Umbrella <input type="checkbox"/> Other	POLICY PERIOD Effective Date : Expiration Date		BODILY INJURY AND PROPERTY DAMAGE (Combined Single Limit) Each Occurrence \$ Aggregate \$
	Workers' Compensation and Employers Liability			Part 1 STATUTORY Part 2 BODILY INJURY Each Accident \$ Disease Each Employee \$ Disease - Policy Limit \$
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY
		Effective Date	Expiration Date	(at beginning of policy period)

THE CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE APPROVED BY ANY POLICY DESCRIBED HEREIN.

Name and Address of Certificate Holder

If any of the described policies are canceled before its expiration date, State Farm will try to mail a written notice to the certificate holder 30 days before cancellation. If however, we fail to mail such notice, no obligation or liability will be imposed on State Farm or its agents or representatives.

Diane Newman
 Signature of Authorized Representative
 AGENT 10/27/00
 Title Date

Agent's Code Stamp

AFO Code **D. NEWMAN (INC) 1089**
MAINE 874

CERTIFICATE OF INSURANCE



- STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
- STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois
- STATE FARM FIRE AND CASUALTY COMPANY, Scarborough, Ontario
- STATE FARM FLORIDA INSURANCE COMPANY, Winter Haven, Florida
- STATE FARM LLOYDS, Dallas, Texas

insures the following policyholder for the coverages indicated below:

Name of policyholder CHIAM, MUOI D.B.A. M.C. SEWING
 Address of policyholder 150 PREBLE STREET PORTLAND, ME.
04101
 Location of operations MAINE
 Description of operations SEAMSTESS

The policies listed below have been issued to the policyholder for the policy periods shown. The insurance described in these policies is subject to all the terms exclusions, and conditions of those policies. The limits of liability shown may have been reduced by any paid claims.

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY (at beginning of policy period)
		Effective Date	Expiration Date	
BINDER 1089-F874	Comprehensive Business Liability	10/27/00	10/27/01	BODILY INJURY AND PROPERTY DAMAGE
This insurance includes:	<input type="checkbox"/> Products - Completed Operations			Each Occurrence \$ 300000
	<input type="checkbox"/> Contractual Liability			General Aggregate \$ 600000
	<input type="checkbox"/> Underground Hazard Coverage			Products - Completed \$
	<input type="checkbox"/> Personal Injury			Operations Aggregate
	<input type="checkbox"/> Advertising Injury			
	<input type="checkbox"/> Explosion Hazard Coverage			
	<input type="checkbox"/> Collapse Hazard Coverage			
	<input checked="" type="checkbox"/> EXTERIOR SIGNS LIABILITY INC.			
	<input checked="" type="checkbox"/> EXTERIOR SIGN COVERAGE \$500.00			
	EXCESS LIABILITY	POLICY PERIOD		BODILY INJURY AND PROPERTY DAMAGE (Combined Single Limit)
	<input type="checkbox"/> Umbrella	Effective Date	Expiration Date	Each Occurrence \$
	<input type="checkbox"/> Other			Aggregate \$
	Workers' Compensation and Employers Liability			Part 1 STATUTORY Part 2 BODILY INJURY
				Each Accident \$ Disease Each Employee \$ Disease - Policy Limit \$
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Deane Newman
 Signature of Authorized Representative

AGENT 10/27/00
 Title Date

Agent's Code Stamp

AFO Code **D. NEWMAN (INC)** **1089**
MAINE **F874**



CITY OF PORTLAND, MAINE

Department of Building Inspection

20

Received from _____ a fee

of _____ /100 Dollars \$

for permit to install
erect
alter

at _____ move
demolish Est. Cost \$

Inspector of buildings

Per _____

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$5.00 or 10% whichever is greater.

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Auditors Copy