

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

Location of Construction: 3-19 Marginal Way		Owner: XXXXXXXX Kevin McQuinn		Phone:	Permit No. 960111
Owner Address:		Leasee/Buyer's Name: Enterprise Rental Car		Phone:	Business Name:
Contractor Name: Hardywood Construction		Address: 55 Hazey Rd Falmouth, ME		Phone: 04105-7418 797-6066	
Past Use: XXXXXX Office		Proposed Use: Same •/nd Reno		COST OF WORK: \$ 3,500.00	PERMIT FEE: \$ 40.00
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>B</i> Type: <i>35</i> <i>50C993</i>
Proposed Project Description: Interior Renovations				Signature: _____ Date: _____	
Permit Taken By: Mary Gresh		Date Applied For: 20 February 1996			

PERMIT ISSUED
Permit Issued:
FEB 23 1996
CITY OF PORTLAND

Zone: *57* CBL: *034-C-004*
Zoning Approval: _____
Special Zone or Reviews:
☐ Shoreland
☐ Wetland
☐ Flood Zone
☐ Subdivision
☐ Site Plan maj ☐ minor ☐ mm ☐

Zoning Appeal
☐ Variance
☐ Miscellaneous
☐ Conditional Use
☐ Interpretation
☐ Approved
☐ Denied

Historic Preservation
☐ Not in District or Landmark
☒ Does Not Require Review
☐ Requires Review

Action:
☐ Approved
☐ Approved with Conditions
☐ Denied
Date: *2/21/96*

**PERMIT ISSUED
WITH LETTER**

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 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 *Eric Gresh* ADDRESS: _____ DATE: *20 February 1996* PHONE: *766-47*

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

CEO DISTRICT *C*

COMMENTS

will have done on building
to provide the steel

inspected on this point
lateral 1-17-79. emergency

checked lists of ~~the~~ ^{spare}

Type

Inspection Record

1-17-79 Date

Foundation:

Framing:

Plumbing:

Final:

Other: