City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Permit N 9 6 0 4 4 8 Owner: Phone: Me admicant of . WINGE ! ALEGOLIZED Leasee/Buyer's Name: Owner Address: Phone: BusinessName: Cationet Pent Office Phone: Contractor Name: Address: Stin i spalled mencil 7.15. Con 1656 See 18 36, 18, 18, 18105 75943560 MAY 2 3 1996 COST OF WORK: Proposed Use: PERMIT FEE: Past Use: 55,00 FIRE DEPT. Approved INSPECTION: Port Diffee 2.27 ☐ Denied Use Group: Type: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved Special Zone or Reviews: Foreneel Cobball Inche Approved with Conditions: □ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: mary branit at 747 1796 **Zoning Appeal** □ Variance This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. □ Interpretation □ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation PERMIT ISSUED ☑ Not in District or Landmark WITH REQUIREMENTS Does Not Require Review Action: CERTIFICATION □ Appoved □ Approved with Conditions 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 □ 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 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 20 Nay 1996 DATE: ADDRESS: PHONE: SIGNATURE OF APPLICANT Land Inompact. 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