

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

<b>Permit No:</b> 04-1236	<b>Issue Date:</b>	<b>CBL:</b> 035 I001001
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<b>Location of Construction:</b> 61 Park Ave	<b>Owner Name:</b> City Of Portland	<b>Owner Address:</b> 389 Congress St	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Leukemia & Lymphoma Society	<b>Contractor Address:</b> 495 Old CT Path Suite 220 Framingham	<b>Phone</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b>	

Deering Oaks Park	Deering Oaks Park / Tent Leukemia Society 1-30x30 and 1-20x20 Set-up 10/2/04 break down 10/03/04	<b>Permit Fee:</b> \$30.00	<b>Cost of Work:</b> \$30.00	<b>CEO District:</b> 1
		<input type="checkbox"/> Approved <input type="checkbox"/> Denied		<b>INSPECTION:</b> Use Group:                      Type
<b>Proposed Project Description:</b> Tent 1-30x30 and 1-20x20 Set-up 10/2/04 break down 10/03/04		Signature:		Signature:
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> <input type="checkbox"/> <input type="checkbox"/> Approved w/Condition <input type="checkbox"/>				

	<b>Date Applied For:</b>			
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..	<b>Special Zone or Reviews</b>			<b>Historic Preservation</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Not in District or Landma
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Does Not Require Revie
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Approved w/Condition
	Maj <input type="checkbox"/> <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**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 provision of the code(s) applicable to such permit.

_____ SIGNATURE OF APPLICAN	_____ ADDRESS	_____ DATE	_____ PHO
_____ RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		_____ DATE	_____ PHO

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<b>Dept:</b>	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 09/23/2004
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved	<b>Reviewer:</b> Mike Nugent	<b>Approval Date:</b> 10/01/2004
<b>Note:</b>			<b>Ok to Issue:</b> <input type="checkbox"/>
<b>Dept:</b> Fire	<b>Status:</b> Approved	<b>Reviewer:</b> Lt. MacDougal	<b>Approval Date:</b> 09/23/2004
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>

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\_\_\_\_\_  
SIGNATURE OF APPLICAN

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PHO

\_\_\_\_\_  
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PHO