Location of Construction:	Owner:		Phone:		Permit No: 980215	
Owner Address:	Lessee/Buyer's Name:	Phone:	Busines	ssName:	PERMIT ISSUED	
Contractor Name:	Address:	Phone	e:		Permit Issued:	
Past Use:	Proposed Use:	COST OF WOR	K:	PERMIT FEE:	MAR 1 2 1998	
; & 8	Sure	FIRE DEPT. □ Approved □ Denied		INSPECTION: Use Group: Type:	CITY OF PORTLAND	
		Signature:	_	Signature:	Zone: CBL:	
Proposed Project Description:	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			Zoning Approval:		
Exect Congress &		Action: Approved Approved with Conditions: Denied			pecial zone of Reviews:	
		Signature:		Date:	□Subdivision	
Permit Taken By:	Date Applied For:	The Mark is & Mat			☐ Site Plan maj ☐minor ☐mm ☐ Zoning Appeal	
 This permit application does not preclude the Building permits do not include plumbing, see Building permits are void if work is not started tion may invalidate a building permit and sto 	eptic or electrical work. d within six (6) months of the date of				☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied	
				PERMIT ISSUED WITH REQUIREMENTS	Historic Preservation ☐ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review	
				WITH KL	Action:	
I hereby certify that I am the owner of record of the authorized by the owner to make this application if a permit for work described in the application is areas covered by such permit at any reasonable here.	as his authorized agent and I agree to issued, I certify that the code official	conform to all applicable is authorized representated	ne owner of e laws of th ive shall ha	record and that I have been nis jurisdiction. In addition	n ☐ Approved with Conditions n, ☐ Denied	
areas covered by such permit at any reasonable no	our to enforce the provisions of the c	ode(a) applicable to such	permit			
		40 1 1877 27	(5).			
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:		
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE			PHONE:	CEO DISTRICT	
White-Pe	ermit Desk Green–Assessor's C	anary-D.P.W. Pink-Pu	blic File	Ivory Card-Inspector		

	COMMENTS		
- deila			
- 19/91 she will	Call when	sy gres	Ly
		m / m	lus"
Segn dont led as q	or permit	114/000	
			
		Inspection Record	
	Type Foundation:		Date
	Framing:		

Other: _____