## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 9 6 0 6 1 9 Location of Construction: Phone: Owner: 4444 Car 54 F WHALES TO BUREAU Leasee/Buver's Name: Phone: BusinessName: PERMIT ISSUED Permit Issued: Contractor Name: Address: Phone: SAS FROGUEDS SE 43.00 10.0000 DE COST TRACES DES DE COME 1 . 1 . . . COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 4,260,00 40.00 CITY OF PORTLAND FIRE DEPT. Approved INSPECTION: WARE THE RESERVE OF THE STREET ☐ Denied Use Group: Type: CBL: Zone: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland HARLES AND BUILDING Denied □ Wetland more of Para Mark Cyster ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: S. T. J. 650: 48 1 18 W 1996 **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-□ Interpretation 3. □ Approved tion may invalidate a building permit and stop all work.. PERMIT ISSUED WITH REQUIREMENTS □ Denied Historic Preservation ■ Not in District or Landmark PERMIT ISSUED WITH REQUIREMENTS Does Not Require Review □ Requires 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit والرطل والصال أزا SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: 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