## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 780-6538 Gardner, Edmund S. III 21-31 Forest Ave Lessee/Buyer's Name: Phone: BusinessName: Owner Address: **X999** 199 Spring St 04101\*\*\*\* Address: Phone: Contractor Name: DEC - 9 1998 COST OF WORK: PERMIT FEE: Proposed Use: Past Use: 1,350.00 35.80 INSPECTION: SIGNATE **FIRE DEPT.** □ Approved Retail Same ☐ Denied Use Group: Type: 037-A-022 Signature: Signature: Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (F Action: Approved Approved with Conditions: ☐ Shoreland Signage Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: SP30 November 1998 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use ☐ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work... □ Denied WITH REQUIREMENTS Aistoric Preservation Not in District or Landmark ☐ 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 is 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 01 December 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

CEO DISTRICT