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: 980846
537 Congress St	Hega Realty		871-1080	
Owner Address:	Lessee/Buyer's Name: Systems Consulting Corp	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name:	Address:	Phone:		Permit Issued:
Dirigo Management/Al Knight	rigo Management/Al Knight One City Center Ptld, ME 04101			
Past Use:	Proposed Use:	COST OF WORK \$ 3,000.00		AUG - 4 1998
Office		L		CITY OF PORTLAND
office		FIRE DEPT.		UTT OF FORTLAND
		Signature:	enied Use Group: Type: MM 7 Signature: Holden,	CBL : 037-C-014
Proposed Project Description: PEDEST			TIVITIES DISTRICT (P.A.D.)	Zoning Approval 8/3/4 p
		Action: A	Approved	Special Zone or Reviews:
Construct new wall dividing b	readroom into breakroom		approved with Conditions:	
& LAN room. Cut in new opening to breakroom		Denied		
5th floor				Flood Zone
		Signature:	Date:	□ Subdivision □ Site Plan maj □minor □mm □
Permit Taken By: MG	Date Applied For:	Date Applied For: 28 July 1998		
				Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
 Building permits do not include plumbing, septic or electrical work. 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 WITH REQUIREMENTS 				□ Miscellaneous
				Conditional Use
				Approved Denied
		WITH	CMMIT	
		•7	REDITIOSUED	Historic Preservation
			REMEN	□ Not in District or Landmark
			NIS	Does Not Require Review
			-	□ Requires Review
				Action:
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				Í I
areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit				Date:
	20 1	uly 1998		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	-
		2		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:	
18/h:4- 0	Permit Dock Groon Accessor's Const	DOW Dink Duk	Nie File work Card Increases	KC/TR F
White–Permit Desk Green–Assessor's Canary–D.P.W. Pink–Public File Ivory Card–Inspector				'NC//~