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: 40 fuller and ave. 375~ 17.6 01-018[Lessee/Buyer's Name: Owner Address: BusinessName: Phone: DE FREELING OF UT. SPRIOTI instale "elenge. Permit Issued: Contractor Name: Address: Phone: ili. 1925 - 275 - 23<u>. 1</u> Boosevell Train, kindner, 1971- 172-11676 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: Lor are - 30 T & M. (M. Colorati Bileation FIRE DEPT. Approved **INSPECTION:** PO PARTIA Use Group 3 Type 2C ☐ Denied CBL: Zone: BICA 99 Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAID.) interior renovation, holls three apply Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 1001-1001 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □ Approved tion may invalidate a building permit and stop all work.. □ Denied **Historic Preservation** □ Not in District or Landmark □ Does Not Require Review □ Requires Review Action: CERTIFICATION □ Appoved 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 ☐ Approved with Conditions □ 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 SIGNATURE OF APPLICANT PHONE: ADDRESS: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: CÈO DISTRICT

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector