

Location of Construction: 477 Congress St.		Owner: Libra Foundation		Phone: 879-6280	
Owner Address: 3 Canal St. Plaza, Portland, ME 04101		Lessee/Buyer's Name: Channel 3 TV		Business Name:	
Contractor Name: Bryce Services		Address: 400 Southborough Dr. So. Portland		Phone: 775-1955	
Past Use: Radio Station		Proposed Use: Radio Station		COST OF WORK: \$ 25,000.00 PERMIT FEE: \$ 174.00 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: B Type: 2B BOCA-9A Signature: <i>[Signature]</i>	
Proposed Project Description: Interior Renovations (radio booths in existing office)		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/> Signature: _____ Date: _____			
Permit Taken By: Gayle		Date Applied For: July 25, 2000 GG			

Permit No: 000825

**PERMIT ISSUED**

Permit Issued

**JUL 27 2000**

CITY OF

Zone: B-3 CBL: 037-F-012

Zoning Approval:

**Special Zone or Reviews:**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
- 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..

\*\*\*\*Call Brad Bryce @ 775-1955

**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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT	ADDRESS:	DATE: July 25, 2000	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

**PERMIT ISSUED WITH REQUIREMENTS**

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

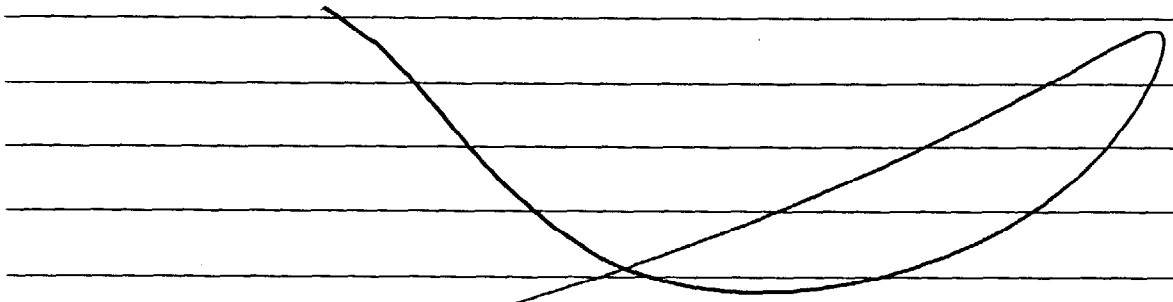
Action:

Approved  
 Approved with Conditions  
 Denied

Date: \_\_\_\_\_

**PERMIT ISSUED WITH REQUIREMENTS**

COMMENTS  
3/9/01 O/K Completed. Please w/STW  
No change of use. Stumps are (90 rd needed). OK



CBL: 37-F-22  
Permit: 000825

Foundation: \_\_\_\_\_  
Framing: \_\_\_\_\_  
Plumbing: \_\_\_\_\_  
Final: \_\_\_\_\_  
Other: \_\_\_\_\_  
Date \_\_\_\_\_  
Type \_\_\_\_\_  
Inspection Record \_\_\_\_\_