						Permit	1				
					_ [		<u></u>	<b>a</b>			
	Location of Construction:  Owner Name:					Owner Address:			Phone:		
477 Congress St  Business Name:			October Corporation Contractor Name:			1 Canal Plz  Contractor Address: Contractor Address:			Dhono		
business Name:			Albair Construction			Contractor Address: 32 Elmwood Street Portland			Phone 2078786887		
Lessee/Buyer's Name		Phone:				ermit Type:		20787800	Zone:		
						Alterations - Commercial				133	
'ast Use: Propos		Proposed Use:	oposed Use:			Permit Fee: Cost of Work:			O District:	1	
· · · · · · · · · · · · · · · · · · ·		Office/Interior	Office/Interior Renovations Tenant Fit Up			\$128.00 \$15,000.00			2		
	Fit Up	Apploved				PECTION					
		و ما ا	814				Denied	Use Group	D/ /	Type:	
		Swift 1	Swife BIA						2/102/19		
Proposed Proj	act Description	E Comment	The i		-			/	3, Or	) &	
roposed Project Description: Interior Renovations/Tenant Fit Up					Signature: HAM S			Signature	onatur Children		
interior Renovations, renam r n op				PEDESTRIAN ACTIVITIES DIST			1				
						ction: Approv		proved w/Con	_	Denied	
						Signature:			Date:		
'ermit Taken					Zoning Approval						
		03/26/2003	Sne	cial Zone or Revi	OWC	ews Zoning Appeal			Historic Preservation		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and					ews						
Federal		g applicable state and	Shoreland Shoreland			Variance			Not in District or Landmark		
2. Building permits do not include plumbing, septic or electrical work.			Wetland			Miscella	Miscellaneous		Does Not Require Review		
3. Building permits are void if work is not started within six (6) months of the date of issuance.			Flood Zone			Conditional Use			Requires Review		
	formation may in and stop all work.	validate a building	☐ Subdivision ☐ Site Plan			☐ Interpretation ☐ Approved			☐ Approved ☐ Approved w/Conditions		
						Denied			Denied Hz	icor wa	
			late:			Date:		Date:	Denied favor war Date: Territor War Approval		
								الم	Appro	re (Cou	
			C	ERTIFICATI	(ON	ī					
I have been a jurisdiction.	uthorized by the of In addition, if a p	wner of record of the na owner to make this appli ermit for work described r all areas covered by su	med procation a	operty, or that the as his authorized application is is	he p d ag ssue	roposed work is gent and I agree t ed, I certify that	to conform the code off	to all applicial's auth	cable laws orized repr	of this esentative	
SIGNATURE (	SIGNATURE OF APPLICANT			ADDRESS			PHONE				
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE					DATE				PHONE		

5/15/03 Completed M\_\_\_\_\_