City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: Owner: Terbax Realty Leasee/Buyer's Name: 772-6404 554 Congress St Owner Address: Phone: BusinessName: 5 Milk St. Portland 04101 Permit Issued: Address: Phone: Contractor Name: JAN 1 6 1997 Bryce Construction 775-4647 Proposed Use: COST OF WORK: PERMIT FEE: Past Use: \$3.000.00 \$ 35<u>.00</u> FIRE DEPT. Approved INSPECTION: Same w/int reno ☐ Denied Use Group: MType: 34 Retail space BOCAG Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. Action: **Approved** Special Zone or Review □ Shoreland Approved with Conditions: Interior reno as per plans Denied □ Wetland ☐ Flood Zone Av9 Subdivision Signature: Date: ☐ Site Plan mai ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: 1/9/97 Vicki D. Zoning Appeal □ Variance This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. □ Conditional Use □ Interpretation 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 Historic Preservation Not in District or Landmark Does Not Require Review ☐ Requires Review MAIL PERMIT TO TERBAX 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 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 P.O. Box 7525 Portland, ME 04112 879-1671 1/9/97 ADDRESS: DATE: PHONE: SIGNATURE OF APPLICANT Tor Glendinning ForeRiver Mat RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector