

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

Please Read Application And Notes, If Any, Attached

PERMIT

Permit Number: 080437

This is to certify that MAINE COLLEGE OF ART Maine College of Art

has permission to Sculptural Partition in entrance to gallery extension

AT 522 CONGRESS ST

037 H004001

PERMIT ISSUED
MAY 28 2008

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and work on permit must be completed before this building or part thereof is closed-in. 48 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Wesley Chase
Health Dept. _____
Appeal Board _____
Other _____
Department Name

James Banks Speck
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Scanned

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0437	Issue Date:	CBL: 037 H006001
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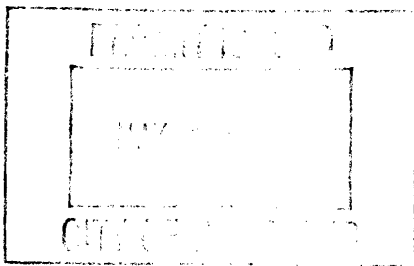
Location of Construction: 522 CONGRESS ST	Owner Name: MAINE COLLEGE OF ART	Owner Address: 97 SPRING ST	Phone:
Business Name:	Contractor Name: Maine College of Art	Contractor Address: 97 Spring Street Portland	Phone 2077753052
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone: S-3

Past Use: Art Gallery Entrance	Proposed Use: Art Gallery Entrance - Sculptural Partition in entrance to gallery tension fabric	Permit Fee: \$30.00	Cost of Work: \$500.00	CEO District: 1
Proposed Project Description: Sculptural Partition in entrance to gallery tension fabric		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Copy of Flame Test Rec.	INSPECTION: Use Group: B Type: N/A IBL-2003 Signature: JMB 5/22/08	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
Action: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	Signature: <i>[Signature]</i> Date: 5/1/08

Permit Taken By: ldobson	Date Applied For: 04/29/2008	Zoning Approval
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<ol style="list-style-type: none"> 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.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>5/1/08</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: <i>5/1/08</i>	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
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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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE