

**City of Portland, Maine – Building or Use Permit Application** 289 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 121 Congress St		Owner: MUSA		Phone:		Permit No: <b>970231</b>	
Owner Address:		Lessee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: MUSA		Address: 76 Congress St		Phone: 207-874-8515		Permit Issued: <b>MAR 20 1997</b>	
Past Use:		Proposed Use:		<b>COST OF WORK:</b> \$ 435,000.00		<b>PERMIT FEE:</b> \$ 1,000.00	
				<b>FIRE DEPT.</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		<b>INSPECTION:</b> Use Group <b>B</b> Type: <b>3B</b> Signature: <i>[Signature]</i>	
Proposed Project Description: RENOVATION OF 121 CONGRESS ST				<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		<b>Zone:</b> <b>CBL:</b>	
Permit Taken By:		Date Applied For: 19 March 1997		Signature:		Date:	

**PERMIT ISSUED**  
**MAR 20 1997**  
**CITY OF PORTLAND**

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

**PERMIT ISSUED WITH REQUIREMENTS**

**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: \_\_\_\_\_ PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_

**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

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

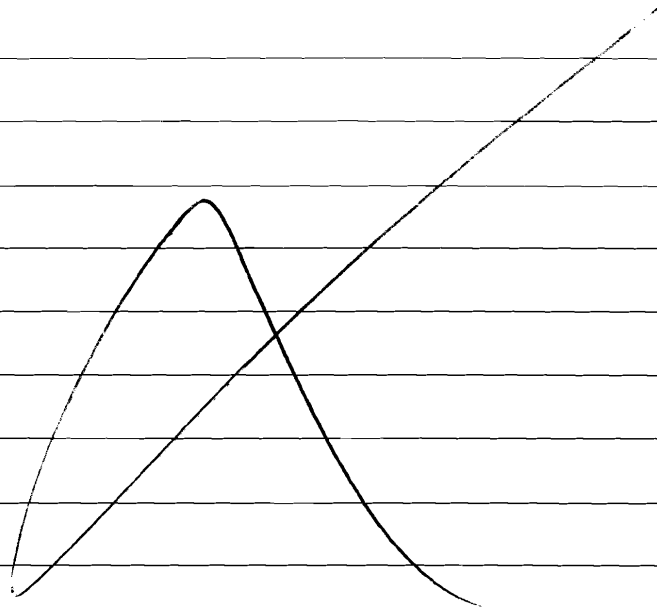
Approved  
 Approved with Conditions  
 Denied

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

**CEO DISTRICT**

COMMENTS

8/5/97 First Floor area OK for CJO. Above



	Type	Inspection Record	Date
Foundation:		N/A	
Framing:		OK. Above	5/2/97
Plumbing:		OK Above	5/2/97
Final:			
Other:			