## City of Portland, Maine - Building or Use Perm. Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: Location of Construction: Phone: Permit No: **Q Q O 43** Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 371 AVINE. Christia . Lows Srate Lileban Perinit Issued: Phone: Contractor Name: Address: 5 1999 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ .5.00 3 : :::: THE ELECTION OF L FIRE DEPT. □ Approved INSPECTION: Use Group: A-3Type 5 C ☐ Denied BOCA 96 CBL: 117-1-113 Zone: Signature: / Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: But Inc. Do Electronia " (1994)" Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: 350万满食品。 医动脉的 Zoning Appeal □ Variance This permit application does not 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** WITH REQUIREMENTS □ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: CERTIFICATION □Appoved ☐ Approved with Conditions 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 ☐ 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 is 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 ADDRESS: PHONE: SIGNATURE OF APPLICANT

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

**CEO DISTRICT** 

PHONE:

## **COMMENTS**

5/22/99- Checked location, they are	
3/17/c2018 - O/S The many Source	
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