

Location of Construction: 20 Free St		Owner: Free St Associates		Phone: 772-9078	
Owner Address:		Lessee/Buyer's Name: Regency Mortgage		Phone: BusinessName:	
Contractor Name: The Signery		Address: 299 Forest Ave Ptlid, ME 04101		Phone: 879-7700	
Past Use: Office		Proposed Use:		COST OF WORK: \$	
				PERMIT FEE: \$ 26.10	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: Type:	
				Signature: _____	
				Signature: <i>[Handwritten Signature]</i>	
Proposed Project Description: Erect Signage 5.5 Sq Ft		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: <i>with</i> <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied			
		Signature: _____		Date: _____	
Permit Taken By: MG		Date Applied For: 13 July 1998			

Permit No **9 80769**

PERMIT ISSUED

Permit Issued:
JUL 16 1998

CITY OF PORTLAND

Zone: **B-3** CBL: 038-A-005

Zoning Approval: *microfiche show officers previous*

Special Zone or Reviews: *7/15/98*

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

- 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..

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

13 July 1998

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

- 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: *[Handwritten Signature]*

CEO DISTRICT 2
A. Rowe