## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:	Owner:		Phone:	Permit No:
xxxxx 2 Portland Square	BCIA Holding		874-6000	
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	- UUU373
1 Portland Square Portland, ME	N/A	N/A	N/A	
Contractor Name:	Address:	Phone		Permit Issued:
**Bryce Services	400 Southborough DRive Sc			
Past Use:	Proposed Use:	COST OF WORL		20R   4
vacant, never been rented		\$ 29,500	\$ 204.00	
	doctor office	FIRE DEPT.	· · · · · · · · · · · · · · · · · · ·	
			Denied Use Group: Type:	Zoge:> CBL:
		Signature:	nvi siman	Zone: CBL: 038-B-002
Proposed Project Description:		2.5	Signature:   CTIVITIES DISTRICT (P.A.D.)	Zoning Approval:
				OF WITH CONCUES
Change of use from vacant to off	ice. Build new office			_   Special Zolle of Beviews. /
and bathroom in existing space.	2001 20120 11011 011100			□ Shoreland → 413/0
	C- of		Attached TI	□ Flood Zone
on Ground floor	of fore S	Signature: 867	. requirem Date: 4/3/00	) □ Subdivision
Permit Taken By: KA	Date Applied For:	3-29-00	121	☐ Site Plan maj ☐minor ☐mm ☐
· KA				Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				<b>Zoning Appeal</b> ☐ Variance
				☐ Miscellaneous
2. Building permits do not include plumbing, septic or electrical work.				☐ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				□ Interpretation
tion may invalidate a building permit and stop	p all work	D. a.l.	2	☐ Approved☐ Denied
		* Brace	riger ( m)	Li Demed
		77.5	1955 For P/U	Historic Preservation
		-		☐ Not in District or Landmark
			PERMIT 100	☐ Does Not Require Review
PERMIT ISSUED				Requires Review  Any Changes to
			WITH REQUIREMENTS	Action: 1
			_	The Exterior SM
	CERTIFICATION			DAppoved regume A
I hereby certify that I am the owner of record of the				en   Li Approved with Conditions (
authorized by the owner to make this application a				
if a permit for work described in the application is	•	-		Date:
areas covered by such permit at any reasonable ho	ar to enforce the provisions of the code	(s) applicable to such	permit	
		3-29-00		]
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
				PERMIT ICCI.
RESPONSIBLE PERSON IN CHARGE OF WORL	K. TITLE		PHONE:	PERMIT ISSUEDI CEO DEQBIREMENTS
				CEO DISUBINEMENTS
White-Pe	ermit Desk Green-Assessor's Cana	ry-D.P.W. Pink-Pu	blic File Ivory Card-Inspector	