

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

Location of Construction: 2 Portland Square 3rd Floor		Owner: MGI Two Portland Square		Phone: 874-6000		Permit No: <i>00005</i>
Owner Address: Peoples Heritage Bank		Lessee/Buyer's Name: N/A		Phone: N/A		
Contractor Name: **Risbara bros. Const. Co Inc.		Address: P.O. Box 485 Scarborough, ME 04070		Phone: 0-0485 883-5528		Permit Issued: <b>MAY 8</b>
Past Use: Office		Proposed Use: Same		COST OF WORK: \$ 60,000		
				PERMIT FEE: \$ 384.00		Zone: <i>B-3</i> CBL: 038-B-002 Zoning Approval: <i>OK</i> 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"/>
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>W.D. Weeks</i>		
Proposed Project Description: Office fit up.				INSPECTION: Use Group <i>B</i> Type: <i>1A</i> Signature: <i>W.D. Weeks</i>		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____
				Permit Taken By: <i>ub</i> Date Applied For: <i>5-3-00</i>		

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..

\*\* Call William D. Weeks for Pick Up  
851-4977

**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

5-3-00

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

**PERMIT ISSUED  
WITH REQUIREMENTS**  
*1*  
*ub*

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action: *No Exterior Work with out A sep. Review and Approval*

Approved  
 Approved with Conditions  
 Denied

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