City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 **Location of Construction:** Phone: Permit No: NYSY COLLECT Strent 04164 b & B Partuers due The brian here 700-1500 990828 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAGE Permit Issued: Phone: Contractor Name: Address: 1 / N COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 26.20 INSPECTION: 3/9/43 **FIRE DEPT.** □ Approved BURGA A LOWILLE Same ☐ Denied Use Group: Type BOCAGO Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: **Approved** Special Zone or Reviews: Sidewalk Sign Approved with Conditions: □Shoreland Denied \Box □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: L.M 8-3-99 **Zoning Appeal** □Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ 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 ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Ball To: 5 & S Partners dba The Brian Soru Historic Preservation 59 Center St. □ Not in District or Landmark Portland, Ar 04101 ☐ Does Not Require Review PERMIT ISSUED WITH REQUIREMENTS □ 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 6-3-199 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector