

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

Location of Construction: 131 Spring Street,		Owner: * Katharyn Moxhay		Phone: 766-2756	
Owner Address: * 254 Pleasant Ave, Peaks Island 04108		Lessee/Buyer's Name:		Phone:	
Contractor Name: Brady CONstruction		Address:		Phone: 282-1010	
Past Use: Apartments		Proposed Use: Birthing center		BusinessName:	
Proposed Project Description: Change of use		COST OF WORK: \$		PERMIT FEE: \$ 25.00	
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <i>BOCA 98</i> Type: <i>513</i>	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied			
Permit Taken By: SP		Date Applied For: 10/9/98			

Permit No: **9 81273**

**PERMIT ISSUED**

Permit Issued:  
NOV 9 1998

**CITY OF PORTLAND**

Zone: *B-3* CBL: 39-a-30

Zoning Approval: *OK with condition 10/16/98*

**Special Zone or Reviews:**

Shoreland *separate*

Wetland *permit required*

Flood Zone *for New*

Subdivision *signature*

Site Plan maj  minor  mm

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..

**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

SIGNATURE OF APPLICANT	ADDRESS:	DATE: 10/9/98	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

**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: *to D.A 10/16/98*

*[Signature]* 10/19/98

CEO DISTRICT **2**