

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

Location of Construction: 25 Spring Street Pl. 04102		Owner: Brian Rollins		Phone: 797-3381	Permit No: <b>991080</b>
Owner Address: SAA		Lessee/Buyer's Name:		Phone:	
Contractor Name: Papi & Romano Bldrs. Inc		Address: P.O. Box 1079 04104 Portland		BusinessName:	
Past Use: Multi-family		Proposed Use: <i>Multi</i> Single Family		COST OF WORK: \$ 1,200	PERMIT FEE: \$ 36.00
Proposed Project Description:  Interior demolition only taking out walls on the 1st floor. Will apply for bldg. permit upon uncovering framing.		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>R-3</i> Type: <i>3B</i> <i>BOCA 96</i> Signature: <i>Hoffner</i>	
		Signature:		Signature:	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Zone: <b>CBL: 039-A-039</b> <i>B-3</i> Zoning Approval: <i>OK</i> <b>Special Zone or Reviews</b> <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"/>	
Permit Taken By: KA		Date Applied For: 9-21-99		Signature: _____ Date: _____	

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..

**\*\*Send To:** Papi & Romano Bldrs. Inc.  
P.O. Box 1079  
Portland, ME 04104

**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: 9-21-99 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: *any exterior work may require*  
 Approved *of separate*  
 Approved with Conditions  
 Denied *Review*

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

CEO DISTRICT  
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