

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

Location of Construction: 110 Free St		Owner: Blue Cross/Blue Shield		Phone:	
Owner Address:		Leasee/Buyer's Name:		Phone:	
Contractor Name: Allied Construction		Address: P.O. Box 1396 Portland, ME 04104		Phone: 772-2888	
Past Use: Office		Proposed Use: Same		Business Name:	
Proposed Project Description: Make Interior Renovations		COST OF WORK: \$ 1,800,000.00		PERMIT FEE: \$ 9,020.00	
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: 0 Type: B	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Date:	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied			
Permit Taken By: Mary Gresik		Date Applied For: 13 December 1996			

Permit No: 961234
PERMIT ISSUED
 Permit Issued:
 DEC 19 1996
CITY OF PORTLAND

Zone: B-3 CBL: 039-C-001
 Zoning Approval:
 Special Zone or Reviews: 12/17/96
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

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: 12/16/96
[Signature]

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 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]
 SIGNATURE OF APPLICANT Paul Laliberty ADDRESS: DATE: 13 December 1996 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

CEO DISTRICT **2**
A. Rowe