

Location of Construction: 110 Free St		Owner: Blue Cross/Blue Shield		Phone:		<b>Permit No: 961234</b> <b>PERMIT ISSUED</b> <b>Permit Issued:</b> <b>DEC 19 1996</b> <b>CITY OF PORTLAND</b>
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		<b>COST OF WORK:</b> \$ 1,800,000.00 <b>PERMIT FEE:</b> \$ 9,020.00 <b>FIRE DEPT.</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <b>INSPECTION:</b> Use Group: 0 Type: 1B Signature: [Signature] Signature: [Signature] <b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		
Proposed Project Description: Make Interior Renovations				Zone: B-3 CBL: 039-C-001 Zoning Approval: [Signature] 12/17/96 <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 <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>		
Permit Taken By: Mary Gresik		Date Applied For: 13 December 1996				

1. This permit application doesn't 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 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 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

- 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

D. Anderson

CEO DISTRICT 2

A. Rowe