

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

Location of Construction: 122 Spring St		Owner: Arthur Alehsire		Phone: 766-2825		Permit No: 980702	
Owner Address: SAA Ptld, ME 04104		Lessee/Buyer's Name: African Tribal Arts Museum		Phone:		BusinessName:	
Contractor Name: Oscar Mokeme		Address: 8 Oakland Ave, P.I. 04108		Phone: 766-2825		Permit Issued: JUL - 2 1998	
Past Use: Museum		Proposed Use:		COST OF WORK: \$		PERMIT FEE: \$ 34.80	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
				Signature:		Signature: <i>[Signature]</i>	
Proposed Project Description: Signage				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>OK - 3 6/12/98</i> Special Zone or Reviews: <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: SP		Date Applied For: 09 June 1998				Zone: CBL: 039-D-004	

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..

Wall Sign DENIED

**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

10 June 1998

SIGNATURE OF APPLICANT ADDRESS: DATE: 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: *To Dec 6/12/98*

☒ Approved *(Partial application)*
☐ Approved with Conditions
☐ Denied

Date: *6/30/98*

MT

CEO DISTRICT *2*

A. Rowe