039-D 0/3

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

| Location of Construction:   | Owner:  | Owner: Albert's and o, Isc.  |   | 43.0   | Permit 19:40943   |  |
|---|---|--|---|--|---|--|
| Owner Address:  | Leasee/Buyer's Name:  | Phone:   | Phone: BusinessName:  |  | Nety tracik   |  |
| Contractor Name:  | Address:  | Phor   | Phone:  |  | PERWIT ISSUED   |  |
| Past Use:   | Proposed Use:   | COST OF WOI  | COST OF WORK: PERMIT FEE: \$  |  | SEP 7 1994  |  |
| 10 C - 2 2  | to distant  | FIRE DEPT.   | Approved  | INSPECTION                                     |   |  |
| ម.្រី « West long - <b>ស្នះបត</b>   | with a pictor and explosion   | ì  | Denied  | Use Group: Type: 5/3 BOCA 94 Signature: Holker | ZELTYCHE PURTLAND   |  |
| Proposed Project Description:   |   |  | ACTIVITIE   | ES DISTRICT (P.J.D.)                           | Zoning Approval:  |  |
| பெண்ணிய இரை இரு இன்றைக்கொளிக்குள் இண்ணி.<br>ந   | MINCENIANE  Of TIREFFICE TO   | Action:  | Approved value of the | with Conditions:                               | ☐ Shoreland ☐ Wetland ☐ Flood Zone  |  |
| This permit application doesn't preclude the A  |   | Signature:   | <del></del>   | Date:  | ☐ Subdivision☐ Site Plan maj☐ minor☐ mm ☐   |  |
| 3. Building permits are void if work is not started tion may invalidate a building permit and stop  |   |  |   |  | ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied  Historic Preservation |  |
| I hereby certify that I am the owner of record of the authorized by the owner to make this application a if a permit for work described in the application is areas covered by such permit at any reasonable ho | s his authorized agent and I agree to c<br>sued, I certify that the code official's | work is authorized by to<br>conform to all applicabauthorized representa | the owner of<br>ole laws of th<br>tive shall hav  | nis jurisdiction. In addition,                 | □ Denied / //   |  |
|   |   | LY Angust 1  |   |  | Marie S   |  |
| SIGNATURE OF APPLICANT  | ADDRESS:  | DATE:  |   | PHONE:   |   |  |
| RESPONSIBLE PERSON IN CHARGE OF WORK  | K, TITLE  |  |   | PHONE:   | CEO DISTRICT  |  |
| White-Pe  | rmit Desk Green-Assessor's Ca   | nary–D.P.W. Pink–P   | ublic File  | Ivory Card-Inspector                           | Ms Munson   |  |

|      |   |      |   |      | COMME | ENTS |
|------|---|------|---|------|-------|------|
| <br> | - | <br> |   | <br> |       |      |
| <br> |   | <br> | _ |      |       |      |

| Sec  | Der      | mit | # 94 | 1023. | 4 for | notes |  |
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| 4444 | <u> </u> | Plr | mits | M     | tile  |       |  |
|      |          |     |      |       |       |       |  |

**Inspection Record** 

| Туре        | Date |
|-------------|------|
| Foundation: |      |
| Framing:    |      |
| Plumbing:   |      |
| Final:      |      |
| Other:      |      |