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

				<del></del>
Location of Construction:	Owner:		Phone:	Permit No: 9 8 0 7 8 1
51-53 York St	Giclee Pri			
Owner Address:	Lessee/Buyer's Name: Maine Color	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name:	Address:	Phone	:	Permit Issued:
Cunningham Securities	313 Read St Ptld, M		878-5858	JL 2 1 1998
Past Use:	Proposed Use:	COST OF WORK	C: PERMIT FEE:	JOL 2 1 1990
		\$ 5,000.00	\$ 45.00	
Commercial		FIRE DEPT.	Approved INSPECTION:	CITY OF PORTLAND
			Denied Use Group: Type:	Zone: CBL: 040-C-030
		Signature: 4	Signature:	
Proposed Project Description:		PEDESTRIAN AC	CTIVITIES DISTRICT (P.A.D.	Zoning Approval:
		Action: A	Approved	
Install Fire Alarm System		1	Approved with Conditions:	☐ Special Zone of Reviews D☐ ☐ Shoreland
install file Alaim System			Denied	□   □ Wetland
				□ Flood Zone
		Signature:	Date:	□ Subdivision
Permit Taken By:	Date Applied For:			☐ Site Plan maj ☐minor ☐mm ☐
MG	Bute Applied For.	16 July 1998		
		<u> </u>		Zoning Appeal
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>Building permits are void if work is not started within six (6) months of the date of issuance. False informa-</li> </ol>				□Variance
				☐ Miscellaneous
				☐ Conditional Use
				□ Interpretation
tion may invalidate a building permit and stop	all work		PED.	☐ Approved
		•	THAMIT	□Denied
			" REOUN SSUE	Historic Preservation
			AULRENED	□ Not in District or Landmark
			ENTO	Does Not Require Review
			MIH REQUIREMENTS	□Requires Review
				Action:
	CERTIFICATION			
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,				Appoved
if a permit for work described in the application is				r all Date:
areas covered by such permit at any reasonable ho	ur to enforce the provisions of the	code(s) applicable to such	permit	Bate.
		17 July 1998		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
	, is said of	<i>57112.</i>	THOME.	
RESPONSIBLE PERSON IN CHARGE OF WORL	K, TITLE		PHONE:	CEO DISTRICT
				JOEO DISTRICT
White-Pe	rmit Desk Green-Assessor's	Canary-D.P.W. Pink-Pul	olic File Ivory Card-Inspector	CEO DISTRICT
				11. Kowe