City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 04101 ***305 Commercial St. Baxter Place Assoc. 772-5522 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: ** Jamison Gallery & Frame 772-5522 Permit Issued: Contractor Name: Address: Phone: AUG 2 0 1999 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ Ø \$ 32.40 INSPECTION: 5197 **FIRE DEPT.** □ Approved Same Retail Use Group: ☐ Denied Type: CBL:_{040-F-009} BOCA 96_ Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Special Zone or Reviews: Signage Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone Signature: Date: □ Subdivision Permit Taken By: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: 8/10/99 KA **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation tion may invalidate a building permit and stop all work.. □ Approved ☐ Denied Send To: Jamison Gallery & Frame 305 Commercial Street **Historic Preservation** Portland, ME 04101 □ Not in District or Landmark □ Does Not Require Review ☑ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS CERTIFICATION Appoved 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 ☐ Approved with Conditions 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, □ Denied 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 8-10-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT