

Location of Construction: <i>100 Commercial Street</i>		Owner: <i>Portland City</i>		Phone: <i>207-874-8703</i>		Permit No: <b>990001</b> <b>PERMIT ISSUED</b> Permit Issued: <b>AUG 20 1999</b> <b>CITY OF PORTLAND</b> Zone: <i>1000</i> CBL: <i>1000</i>	
Owner Address: <i>100 Commercial Street</i>		Lessee/Buyer's Name: <i>Portland City</i>		Phone: <i>207-874-8703</i>			Business Name: <i>Portland City</i>
Contractor Name: <i>Portland City</i>		Address: <i>100 Commercial Street</i>		Phone: <i>207-874-8703</i>		Zoning Approval: <b>1000</b> <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 maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Past Use: <i>Retail</i>		Proposed Use: <i>Office</i>		COST OF WORK: \$ <i>5000</i> PERMIT FEE: \$ <i>100</i>			INSPECTION: <i>3197</i> Use Group: <i>DOCA96</i> Type: Signature: <i>[Signature]</i>
Proposed Project Description: <i>REPAIR</i>		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____			
Permit Taken By: <i>[Signature]</i>		Date Applied For: <i>8/16/99</i>				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

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..

Send for building safety & code  
389 Congress Street  
Portland, ME 04101

**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

SIGNATURE OF APPLICANT \_\_\_\_\_ ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

**CEO DISTRICT**

