

Location of Construction: 14-26 York St		Owner: Balter Place Assoc.		Phone:		Permit No: 341377
Owner Address:		Lease/Buyer's Name:		Phone:		
Contractor Name: M. H. Construction		Address: 46 Congress St Portland, ME 04101		Phone: 773-7618 or 773-3000/0rep		Permit Issued: DEC 23 1994 CITY OF PORTLAND
Past Use: Vacant		Proposed Use:		COST OF WORK: \$ 15,000. PERMIT FEE: \$ 145.00 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: Type 30 Signature: <i>[Signature]</i> Signature: <i>BOCA 93</i>		
Proposed Project Description: See repairs to roof as per plans				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____		Zone: CBL: 040-1-11 Zoning Approval: 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: <i>[Signature]</i>		Date Applied For: 26 Dec 94				

1. This permit application doesn't 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..

PERMIT ISSUED WITH LETTER

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 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: <i>Michael [Signature]</i>	ADDRESS:	DATE: 20 Dec 94	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:

Approved
 Approved with Conditions
 Denied

Date: *12/22/94*

CEO DISTRICT 2
Ms Manson

COMMENTS

See notes on other filed permits - kept thru out entire job.

Inspection Record

Type

Date

Foundation: _____

Framing: _____

Plumbing: _____

Final: _____

Other: _____
