

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

Location of Construction: 260 Commercial ST. 04101		Owner: Browne International		Phone: 766-2402 ext.110		Permit No: 000125	
Owner Address: ***260 Commercial ST. 04101		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: **Browne Trading Co.		Address: **260 Commercial ST. 04101		Phone:		Permit Issued:	
Past Use: Vacant Retail		Proposed Use: Retail Store		COST OF WORK: \$ 4,000.00		PERMIT FEE: \$48.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: M Type: 30	
				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
Proposed Project Description: Interior Renovations & Stairs				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>			
				Signature: _____ Date: _____			
Permit Taken By: GD		Date Applied For: GD February 16, 2000					

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..

**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

February 16, 2000

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ 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

Zone: CBL: 041-A-015
WCE
Zoning Approval: *retail ok*
with existing under 14-31A
Special Zone or Reviews: *(S)*
☐ Shoreland *N/A per exempt*
☐ Wetland
☐ Flood Zone
☐ Subdivision
☐ Site Plan maj ☐ minor ☐ *2/19/2000*

Zoning Appeal

- ☐ Variance
- ☐ Miscellaneous
- ☐ Conditional Use
- ☐ Interpretation
- ☐ Approved
- ☐ Denied

Historic Preservation

- ☐ Not in District or Landmark
- ☐ Does Not Require Review
- ☐ Requires Review

Action: *any exterior work requires a sep. review*
☐ Approved
☐ Approved with Conditions
☐ Denied

Date: _____

**PERMIT ISSUED
WITH REQUIREMENTS
CEO DISTRICT**