

**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. <b>000741</b> <b>PERMIT ISSUED</b> Permit Issued: <b>JUL 1<sup>st</sup> 2000</b> CITY OF PORTLAND Zone: CBL: <b>044-G-005</b> Zoning Approval: <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"/>		
Owner Address:		Lessee/Buyer's Name:		Phone:			Business Name:	
Contractor Name:		Address:		Phone:				
Past Use:		Proposed Use:		COST OF WORK: \$ _____ FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____			PERMIT FEE: \$ _____ INSPECTION: Use Group <b>R-2</b> Type <b>23</b> <b>BOCA 99</b> Signature: <i>Hiffer</i>	
Proposed Project Description:								
Permit Taken By:		Date Applied For:						

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

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

**PERMIT ISSUED WITH REQUIREMENTS**  
 CEO DISTRICT

COMMENTS

CBL 044-6-005  
# 000741

8/8/00 On-Site Pre-construction w/ AIA & Plumbers  
discuss in ground plumbing.

8/15/00 Plumbing Test & Wall Remove OH (BC)

10/3/00 Final OH (BC)

Inspection Record  
Type Date

Foundation: \_\_\_\_\_

Framing: \_\_\_\_\_

Plumbing: \_\_\_\_\_

Final: \_\_\_\_\_

Other: \_\_\_\_\_