City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8. Location of Construction: Owner: Phone: Permit No: Q 144 State Street Mercy Hospital Lessee/Buver's Name: Phone: BusinessName: Owner Address: Permit Issued: Contractor Name: Address: Phone: - 6 1997 P.O. Box 1028, Westbrook 04098 Les Wilson & Sons 854-4583 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$35,00 FIRE DEPT. Approved INSPECTION: Hosp Same w/underground oil tank ☐ Denied Use Group: Type: Zone: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT P Action: Approved Install 15,000 gal oil tank underground Approved with Conditions: ☐ Shoreland Denied ☐ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Vicki Dover 5/1/97 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. 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 ☐ Approved tion may invalidate a building permit and stop all work... □ Denied **Historic Preservation** □ Not in District or Landmark Mail to contractor □ Does Not Require Review Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 ☐ Denied 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 P.O. Box 1028, Westbrook 04098 854-4583 ADDRESS: DATE: PHONE: Chris Wilson Les Wilson & Sons RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT