

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

Location of Construction: 100 State St		Owner: Mercy Hospital		Phone:		Permit No 960856	
Owner Address:		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: Allen Management Co.		Address: 100 State St Ptd, ME 04101		Phone: 775-1437/ Bruce Miller		Permit Issued: AUG 28 1996	
Past Use: Elderly Housing		Proposed Use: Same		COST OF WORK: \$ 800.00		PERMIT FEE: \$ 25.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>14</i> Type: <i>1B</i> <i>DOCA-96</i>	
Proposed Project Description: Construct Steps as per plans		Signature:		Signature:		Zone: <i>E-2</i> CBL: 045-D-003	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Approval: <i>Access route - no FA structure</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>OK</i> <input type="checkbox"/> Flood Zone <i>8/27/96</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>major minor mm</i>	
Permit Taken By: Mary Gresik		Date Applied For: 07 August 1996		Signature:		Date:	

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 REQUIREMENTS

- Zoning Appeal**
- Variance
 - Miscellaneous
 - Conditional Use
 - Interpretation
 - Approved
 - Denied

- Historic Preservation**
- Not in District or Landmark
 - Does Not Require Review
 - Requires Review

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

Bruce L. Miller
 SIGNATURE OF APPLICANT Bruce Miller ADDRESS: DATE: 07 August 1996 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

Action:
 Approved
 Approved with Conditions
 Denied
 Date: *8/26/96*

J. Anderson
 CEO DISTRICT **3**
A. Fournier