City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 990553 Location of Construction: Owner: Phone: 7 - 45 J. 1. 1. 1. 1. 1. 12: 25 . Jan Barry Garage Lessee/Buver's Name: Phone: BusinessName: Owner Address: a say a say 100 Permit Issued Address: Phone: Contractor Name: · 141 2 1999 **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: an Digital FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: Type: Zone: CBL: 🕍 🤫 🛶 🔭 🚶 Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: onification to eliet. A tribati kindar entitie ascrib. Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone ☐ Subdivision Date: Signature: ☐ Site Plan maj ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: 3-13-59 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □Miscellaneous 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 3. □ Approved tion may invalidate a building permit and stop all work.. □ Denied **Historic Preservation** PERMIT ISSUED □ Not in District or Landmark WITH REQUIREMENTS ☐ 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit و 9⊷ار اسوا PHONE: SIGNATURE OF APPLICANT ADDRESS: DATE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

COMMENTS

Type Foundation: Framing: Plumbing: Final:			6-17-99 Visseted with Fred. Clark New Fire 45 cape is Fromed okto
Date			