

Location of Construction: 671 Congress St		Owner: William & Andrew Doukas		Phone: 879-7924/	
Owner Address: 193-197 State St #4 Ptld		Lessee/Buyer's Name:		Phone:	
Contractor Name: Tom Sevigny & Sons 934-4255		Address:		Phone:	
Past Use: Vacant		Proposed Use: REtail		COST OF WORK: \$ 5,000.00	
				PERMIT FEE: \$ 50.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: Type:	
				Signature: <i>[Signature]</i>	
Proposed Project Description: Change Use/Make Int Reno				Signature: _____ Date: _____	
Permit Taken By: SP		Date Applied For: 08 Sept 98			

Permit No **9 8 1 0 7 6**

PERMIT ISSUED

Permit Issued:
SEP 25 1998

CITY OF PORTLAND

Zone: **B-3** CBL: 046-C-013

Zoning Approval: *[Signature]*

Special Zone or Reviews:

Shoreland *[Handwritten: Any Exterior Work Shall require Historic Review]*

Wetland

Flood Zone

Subdivision

Site Plan *[Handwritten: major]* minor mm

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

Zoning Appeal

Variance *[Handwritten: OK]*

Miscellaneous *[Handwritten: 9/18/98]*

Conditional Use

Interpretation

Approved

Denied

Historic Preservation

Not in District or Landmark

Does Not Require Review

Requires Review

Action:

Approved

Approved with Conditions

Denied

Date: *[Signature]*

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

10 Sept 98

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

CEO DISTRICT 2

KC/TR