## Location of Construction: Owner: Phone: **Permit No:** 04101 **\*\*6** Deering Street Christine Waite Maclin 774-9545 290721 **Owner** Address: Lessee/Buyer's Name: Phone: \*BusinessName: Christine Maclin Interiors 39 Deering St. Ptld, ME 04101 Permit Issued: Contractor Name: Address: Phone: Sign Solutions 75 Bishop Street Ptld, ME 878-8000 **COST OF WORK:** Past Use: Proposed Use: **PERMIT FEE:** \$ Ø \$ 25.44 Retail Same **FIRE DEPT.** □ Approved INSPECTION: 5197990 Use Group: MType: □ Denied Zoner B-2 CBL: AU 046-D-016 Signature: Proposed Project Description: Zoning Approv PEDESTRIAN ACTIVITIES DISTRIC Action: Approved Special Zóne or Rev Erect 1 15" x 19" sign. Approved with Conditions: □ Shoreland Denied U Wetland □ Flood Zone □ Subdivision Signature: Date: Site Plan maj Eminor Emm Permit Taken By: Date Applied For: UB June 29, 1999 Zoning Appeal U Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. Conditional Use 3. 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 Mail to: Christine Waite Maclin 6 Deering Street **Historic Preservation** Portland, ME 04101 □ Not in District or Landmark Does Not Require Review Arequires Review PERMIT ISSUED Action: 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 □ Approved with Conditions 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 6-30-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT** ub White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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