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|------------------------------------|--|----------------------|--|---|--|
| Location of Construction: <i>X</i> | | Owner: <i>X</i> | | Phone: | Permit No. 960988 <div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: OCT - 8 1996 CITY OF PORTLAND </div> |
| Owner Address: | | Leasee/Buyer's Name: | | Phone: | |
| Contractor Name: | | Address: | | Phone: | |
| Past Use: | | Proposed Use: | | COST OF WORK: \$ _____ PERMIT FEE: \$ _____ FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: <i>B</i> Type: <i>35</i> Signature: <i>[Signature]</i> | |
| Proposed Project Description: | | | | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____ | Zoning Approval: Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> |
| Permit Taken By: | | Date Applied For: | | | |

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..

Zoning Appeal

Variance
 Miscellaneous
 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: _____

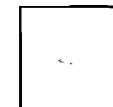
CERTIFICATION

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

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

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

CEO DISTRICT



Building or Use Permit Application 200 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

| | | | | | | | |
|---|--|---|--|---|--|--|--|
| Address: 605 603 Congress St | | Owner: Congress Property Management | | Phone: | | Permit No: 960988 | |
| Leasee/Buyer's Name: People's Heritage Bank | | Phone: | | BusinessName: | | PERMIT ISSUED Permit Issued: OCT - 8 1996 CITY OF PORTLAND | |
| Contractor Name: Pond Cove Millwork Co., Inc. | | Address: P.O. Box 2778 So. Ptld, ME 04116 | | Phone: 767-5515 | | | |
| Past Use: Office | | Proposed Use: Same | | COST OF WORK: \$ 3,543.00 PERMIT FEE: \$ 40.00 | | FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: <u>B</u> Type: <u>3B</u> Signature: <i>[Signature]</i> Signature: <i>[Signature]</i> | |
| Proposed Project Description: Make Interior Renovations | | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: <i>[Signature]</i> Date: <u>10/4/96</u> | | Zoning Approval: <i>[Signature]</i> Zone: <u>B-3</u> CBL: 046-D-031 Special Zone or Reviews: <input type="checkbox"/> Shoreland <input checked="" type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> | | | |
| Permit Taken By: Mary Gresik | | Date Applied For: 04 October 1996 | | | | | |

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Zoning Appeal

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| | | | |
|---|----------|-----------------------|--------|
| SIGNATURE OF APPLICANT <i>[Signature]</i> | ADDRESS: | DATE: 04 October 1996 | PHONE: |
| RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE | | | PHONE: |

Action:

Approved
 Approved with Conditions
 Denied

Date: 10/9/96

[Signature]

CEO DISTRICT 5

[Signature]

3/OCT 96 STOP TO WORK MON STARTED

COMMENTS

Lined area for handwritten notes.

Inspection Record

| Type | Date |
|-------------------|-------|
| Foundation: _____ | _____ |
| Framing: _____ | _____ |
| Plumbing: _____ | _____ |
| Final: _____ | _____ |
| Other: _____ | _____ |