City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: Phone: Location of Construction: Permit No: and take the 001128 Lessee/Buyer's Name: BusinessName: Owner Address: Phone: Permit Issued: Phone: Contractor Name: Address: 李明显 电电子 医二甲醛乙基甲二甲二烯甲基甲醛 OCT _ 6 LUUU **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: **\$** S. L. W.T. P. Barrens L. FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: 8-3 Type: 51 Zone: CBL: BOC 497 Megy 93 Signature: 74 € (1 × 145°) Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) Approved Action: Special Zone or Reviews: Provide Fold Contact of the Con-Approved with Conditions: ☐ Shoreland Denied □Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 1 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use □Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work... □ Denied Closed **Historic Preservation** □ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS **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 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: PERMIT ISSUED WITH REQUIREMENTS 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