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

Location of Construction: Owner:		Phone:		Permit No: 950804	
Owner Address:	Leasee/Buyer's Name: Phone		BusinessName:		
Owner Address.	Leasee/Buyer's Name.	Filone.	Businessivaine.	PERMIT ISSUED	
Contractor Name:	Address:	Phone	Permit Issued:		
Reducing State of the Section	and the second	La construction and the second		ALIC 21005	
Past Use:	Proposed Use:	COST OF WOR	K: PERMIT FEE:	- AUG <b>- 3 1995</b>	
		\$	\$		
		FIRE DEPT. 🗖	Approved INSPECTION: (1	CRY OF PORTLAND	
<b></b>	1. A.		Approved INSPECTION: U Denied Use Group: B Type: 3		
			BOCANIAL		
		Signature:	Signature: Twick-	K-6	
Proposed Project Description:	PEDESTRIAN A	CTIVITIES DISTRICT (P/J/D.)	Zoning Approval:		
		Action:	Approved E	Special Zone or Reviews:	
Start and Asthe Sant		Approved with Conditions:	□ □ Shoreland		
			Denied [		
				Flood Zone	
		Signature:	Date:		
Permit Taken By:	Date Applied For:	JUL 195		Site Plan maj minor mm	
				Zoning Appeal	
1. This permit application doesn't preclude th	ne Applicant(s) from meeting applicable	e State and Federal rules.		□ Variance	
				Miscellaneous	
				Conditional Use	
3. Building permits are void if work is not sta		issuance. False informa-		□ Interpretation	
tion may invalidate a building permit and	stop all work			Approved Denied	
				Historic Preservation	
ل.:				Not in District or Landmark	
· !	D Does Not Require Review				
				Action: measure	
TAX = 14-0833					
	CERTIFICATION			Appoved	
I hereby certify that I am the owner of record of	n Approved with Conditions				
authorized by the owner to make this application	on as his authorized agent and I agree to	o conform to all applicabl	e laws of this jurisdiction. In addition	n, Denied	
if a permit for work described in the application	m issued, I certify that the code official	's authorized representati	ve shall have the authority to enter a	I Date:	
areas covered by such permit at any reasonable	hour to enforce the provisions of the c	code(s) applicable to such	permit	Dale	
1 1 1 1 1	and the second se				
and the second	r	1990 <u>199</u> 1 - 1995 - 1996 - 19			
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	—	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:	CEO DISTRICT	
White	-Permit Desk Green–Assessor's (	anany_D DW/ Dink Du	ublic File Ivory Card Inspector		
wille-	T CHINE DESK MICCH-ASSESSUIS (			· · ·	

Inspection Record   Type   Foundation:   Framing:   Plumbing:   Final:   Other:	f 15 an installing hut		COMMENIS
Date	Aprilia Cen		