

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

Location of Construction: 519 Cumberland Ave. 04101		Owner: 519-521 Cumberland Ave. INc. c/o Elaine Fitts		Phone: 625-3085 625-7172	Permit No: 091214
Owner Address: RR 1 Box 311 Cornish, ME 04020		Lessee/Buyer's Name: N/A		Phone: N/A	Permit Issued: 4-1-99
Contractor Name: Jonathan Fitts		Address: RR1 Box 311 Cornish, ME 04020		BusinessName: N/A	
Past Use: Multi-Family 8 Legal Units		Proposed Use: Same	COST OF WORK: \$ 450.00	PERMIT FEE: \$ 30.00	Zone: R-6 CBL: 048-F-014 Zoning Approval: <i>[Signature]</i> Special Zone or Reviews: <i>[Signature]</i> <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"/>
			FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group 42 Type: 512 130C996	
Proposed Project Description: Propose to build smoke room walls for existing boiler. See Plans on Back Page			Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied
Permit Taken By: UB		Date Applied For: 10-28-99	Signature:	Date:	

1. This permit application does not 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..
- ** Call Elaine Fitts for Pick Up 625-7172 or 3085**

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: _____

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

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: 10-28-99 PHONE: _____

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

PERMIT ISSUED WITH REQUIREMENTS
CEO DISTRICT
 ub 2