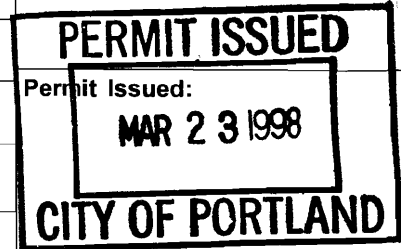


**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Permit No: **980259**

Location of Construction: 515 Commercial Ave Apt 1		Owner: [unclear]		Phone:	
Owner Address:		Lessee/Buyer's Name: [unclear]		Phone: [unclear]	
Contractor Name:		Address:		Phone:	
Past Use: [unclear]		Proposed Use: Wave without ramparts		COST OF WORK: \$ [unclear]	
				PERMIT FEE: \$ 15.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: Type:	
Proposed Project Description: [unclear]				Signature: _____	
				Signature: _____	
				Signature: _____	
				Date: _____	
Permit Taken By: [unclear]		Date Applied For: March 19, 1998			



Zone: \_\_\_\_\_ CBL: \_\_\_\_\_

Zoning Approval:

**Special Zone or Reviews:**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

**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

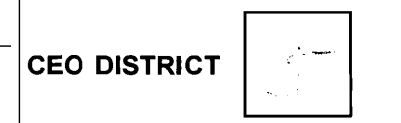
Date: \_\_\_\_\_

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..

**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 [unclear]	ADDRESS: [unclear]	DATE: March 19, 1998	PHONE: [unclear]
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:



COMMENTS

TER called 3-26-98 (07:45) said (Mrs Devlin) that they would call  
when office is complete for cof0

4/7/05

Dine

A. Rowe

Inspection Record	
Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____