

City of Portland, Maine – Building or Use Permit Application 380 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:		Owner:		Phone:		Permit No: 960157	
Owner Address:		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name:		Address:		Phone:		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED <small>Permit Issued:</small> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> MAR - 8 1996 </div> CITY OF PORTLAND </div>	
Past Use:		Proposed Use:		COST OF WORK: \$ _____ PERMIT FEE: \$ _____			
Proposed Project Description:		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____ Signature: _____		PEDESTRIAN ACTIVITIES DISTRICT (P.U.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"/>	
				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied		Historic Preservation <input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: _____	
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..

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 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

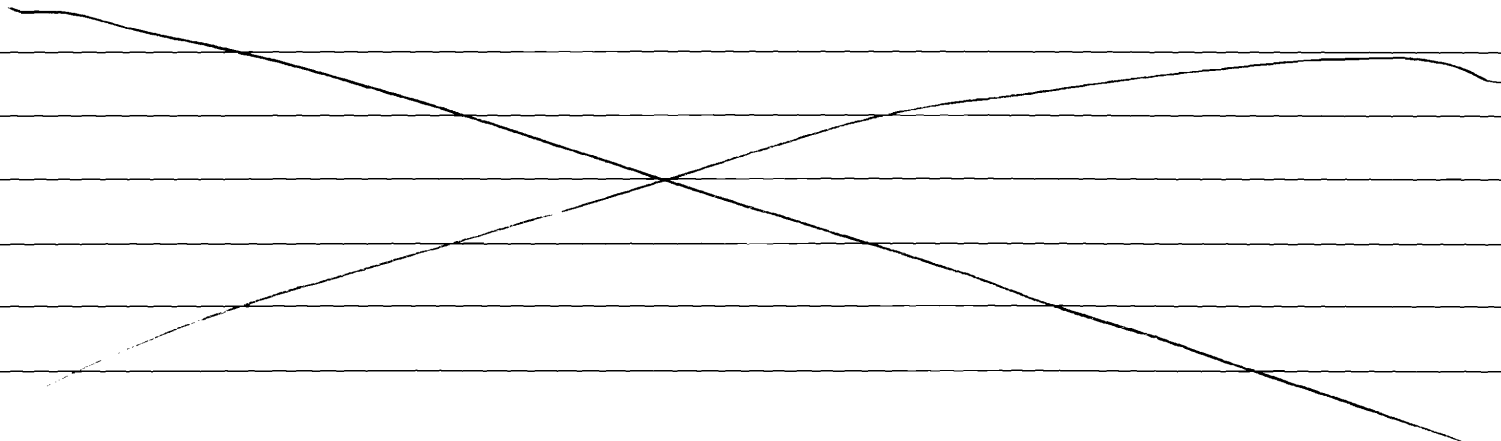
SIGNATURE OF APPLICANT: _____		ADDRESS: _____		DATE: _____		PHONE: _____	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				PHONE: _____			

CEO DISTRICT

COMMENTS

3/13/90: Directed damaged interior items. Plumber removed
Hole removed sign canopy. Need to repair glass.

7/6/90: Not completed yet. The tenant has not chosen to
remain in the space. Need to finish trim work and base
@ main floor area. New owner: Tom Watson.



Inspection Record

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