## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Phone: Location of Construction: Owner: Permit No: Leasee/Buyer's Name: Phone: BusinessName: Owner Address: Phone: Address: Contractor Name: PERMIT FEE: COST OF WORK: -91996Past Use: Proposed Use: FIRE DEPT. TY Approved **INSPECTION:** ☐ Denied Use Group: Type: CBL: Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Denied П ☐ Wetland -☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: e Y state of a co **Zoning Appeal** □ Variance This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 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 Historic Preservation ☐ Not in District or Landmark ☐ Does Not Require Review PERMIT ISSUED ☐ Requires Review Action: **CERTIFICATION** ☐ Appoved 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 ☐ Approved with Conditions 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, □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit ADDRESS: SIGNATURE OF APPLICANT DATE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE: #

**CEO DISTRICT** 

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

## COMMENTS

5/28/9U	no wor	kyet				
8/6/96	Canopy	Installed.	Used,	rot a	new see	t-up:
				<b></b>	Inspection Record	<b>.</b>
			Foundation	<b>Type</b> n:		Date
			Framing:			
			Other			