

Location of Construction: 19 West St 1st fl		Owner: CORPORATION/ COMPANY		Phone:		Permit No: <b>960662</b>	
Owner Address:		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: DISKUP CONSTRUCTION		Address: P.O. Box 1058 Portland, ME 04107		Phone: 734-0111		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>                  Permit Issued:  <b>JUL 10 1996</b>  <b>CITY OF PORTLAND</b> </div>	
Past Use: OFFICE		Proposed Use: same		<b>COST OF WORK:</b> \$ 2000.00 <b>PERMIT FEE:</b> \$ 60.00		<b>INSPECTION:</b> Use Group: B Type: 3 BOCA 93 Signature: [Signature]	
Proposed Project Description: take interior renovations		<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/> Signature: [Signature] Date: [Date]		Signature: [Signature] Date: [Date]		Zone: CBL: Zoning Approval: <b>Special Zone or Reviews:</b> <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"/>	
Permit Taken By: Mary Trevisi		Date Applied For: 01 July 1996				<b>Zoning Appeal</b> <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	

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 LETTER**

**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: [Signature] ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: PHONE:

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action: [Signature]  
 Approved  
 Approved with Conditions  
 Denied

Date: [Date]

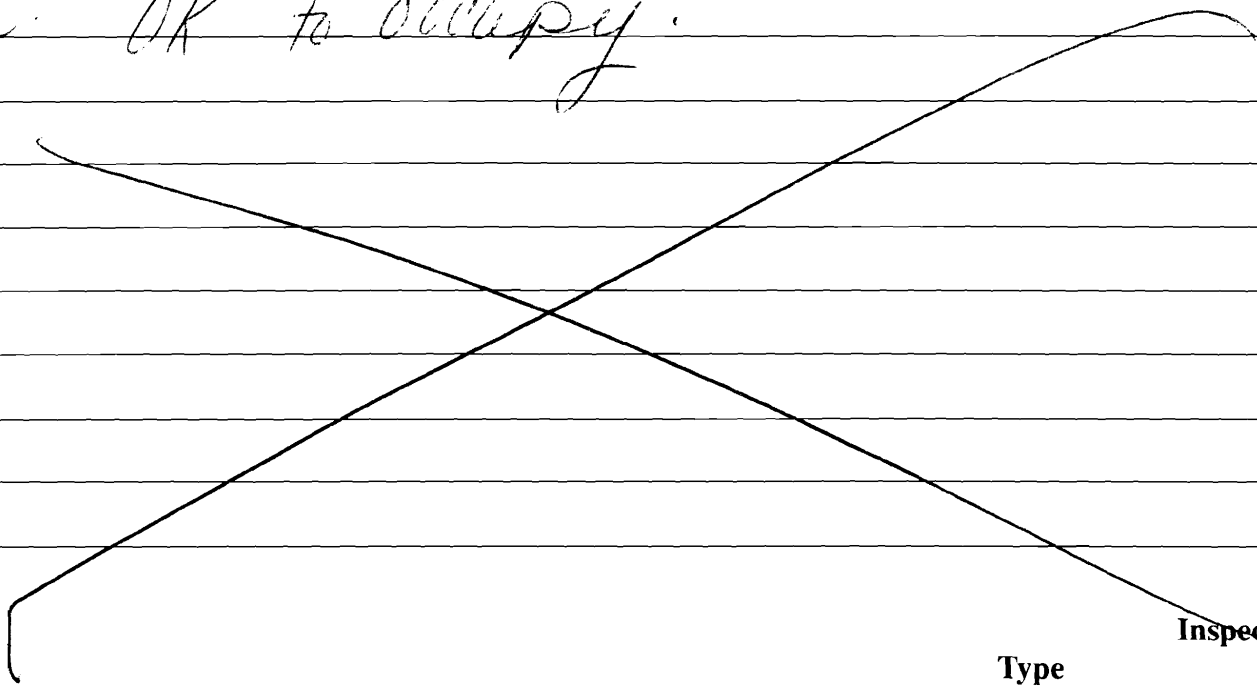
CEO DISTRICT

COMMENTS

8/15/90 Have yet to block in 2 doorways, have removed walls. New doors on site, Contractor not available.

8/14/90 C of O Inspection - have asked contractor to poke out left directional arrow or signage indicating EXIT.  
Electrical Inspector had issues - will speak to him.

8/21/90 Mike Allison Electrical Inspector's issues all set. OK to occupy.



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