City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 871-9060 Milagro, Inc. 64 Pine Street, 04101 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 64 Pine Street, 04101 Permit Issued: Contractor Name: Address: Phone: 871-9348 1 Bowdoin St Raymond Keith MAY 12 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: 7150.00 72.00 SAME Retail/ Store **FIRE DEPT.** □ Approved INSPECTION: Use Group: Type:5/3 ☐ Denied CBL: BOCA 99 056-C-002 Signature: Signature: Zoning, Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (B Action: Approved Special Zone or Reviews: Foundation for walk-in cooler Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: △ Site Plan mai □minor □mm □ Date Applied For: Permit Taken By: 5-08-2000 Ci WCA GD Zoning Appea This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. □ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Call P/u Historic Preservation □ Not in District or Landmark 870-7015 pager □ Does Not Require Review □ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS 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 □ Denied 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 5/8/2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CEO DISTRICT

PHONE: