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

Location of Construction: 192 Brackett Street 041		Owner: Nancy Flood		Phone: 207-772-3385		Permit No: 9 9 1 1 9 3
Owner Address:	Lessee	/Buyer's Name:	Phone:	BusinessName:		77447
SAA		N/A	N/A	Bracke	tt St. Veterinary	¢linic
Contractor Name:	Addres	s:	Phone	:		Permit Issued:
Screentech Tom		Biddeford, ME	282-5125			ally to 1 0000
Past Use:	Propos	ed Use:	COST OF WORK	ζ:	PERMIT FEE:	****
Mixed Use		Same	\$ Ø		\$ 34.08	
mixed use		Same	FIRE DEPT. □ Approved		INSPECTION: 51917994	
Apt/Vet Clinic				enied	Use Group: Type:	7/ 0.01
Apt/vet clinic					BOCA96, DD	Zond: GBL: 056-C-008
Proposed Project Description:			Signature:	~~~~	Signature: Auffau	Zoning Approval:
1	_				CS DISTRICT (P.A.D.)	using B-12mg 12mg
2 Signs l Sign -				Approved		Special Zone or Reviews
l Sign -	6' Total	20.5 sq. ft.	Approved with Conditions:			□ Shoreland ○
			l	Denied		□ Wetland
			Ciamatuma		Data	☐ Flood Zone ☐ Subdivision ☐ Alga
n : m1 n		Data Applied Fem	Signature:		Date:	☐ Site Plan maj ☐ phinor ☐ mm/☐
Permit Taken By: UB		Date Applied For:	10/7/99			Done Fran maj Eynnor Einny E
						Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.						□ Variance
2. Building permits do not include plumbing, septic or electrical work.						☐ Miscellaneous
						☐ Conditional Use ☐ Interpretation
3. Building permits are void if work is not tion may invalidate a building permit a			iance. Faise informa-			☐ Approved
from may invandate a bunding permit a	nd stop an wor		Please SEnd To:	John	Flood	☐ Denied
					Brackett St.	
					and, ME 04102	Historic Preservation
					•	□ Not in District or Landmark
						☐ Does Not Require Review☐ Requires Review
						Exception to the second
				DEDM	IT ISSUED	Action: A A A A
			,			Pent X will have
		CERTIFICATION			QUIREMENTS	To Approved (40 00
I hereby certify that I am the owner of record			-			
authorized by the owner to make this applic						
if a permit for work described in the applica					ve the authority to enter all	Date: 10 D. A. 10/14/99
areas covered by such permit at any reasona	ible hour to en	force the provisions of the code	(s) applicable to such	permit		10 2 1 1 1 1
						1/12
			10-7-99			DND 1/120191
SIGNATURE OF APPLICANT		ADDRESS:	DATE:		PHONE:	1017
						LEKWII ISSUED
	HODE TO				DUONE	WITH REQUIREMENTS
RESPONSIBLE PERSON IN CHARGE OF	WORK, TITL				PHONE:	CEO DISTRICT
						116