City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 9 8 0 7 5 7 Location of Construction: Phone: 773-4616 116 Clark St Hayes, Connie Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 04102 SAA **Flermi** Issued: Contractor Name: Address: Phone: JL 15 1998 Proposed Use: COST OF WORK: PERMIT FEE: Past Use: 10,000.00 70.00 CITY OF PORTLAND **INSPECTION: FIRE DEPT.** □ Approved 2-fam Use Group: 33Type:52 ☐ Denied BOCA 96 CBL: 057-C-009 Signature: Signature: Zoning Approval: という Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. A/b). Action: Approved Interior Renovations of existing attic space/3rd fl Approved with Conditions: for use for 2 bedrooms and 1 bath Denied □ Wetland □ Flood Zone 7 □ Subdivision This ShAll Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: SP 07 July 1998 Tunnto ANEwmit Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 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 **Historic Preservation** □ Not in District or Landmark Does Not Require Review ☐ Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ 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 08 July 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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

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