## 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: 116 Brackett Street (116-118-120) Aids Lodging House Inc. 773-7165 001210 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 142 High Street, Portland, ME Contractor Name: David A. Dobsen Address: 5 Kathy Lane, Cumberland, ME Permit Issued: Phone: 1 829-5411 **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: £ . . . **\$0.** \$30.00 Multi Family FIRE DEPT. D Approved Multi family INSPECTION: Use Group: 12 Type: 5/3 ☐ Denied CBL: 057-D-014 BOCA94 Zgne: Signature Signature: Proposed Project Description: Zonin PEDESTRIAN ACTIVITIES DISTRICT/P Action: Approved Amendment to permit # 001160 Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone Signature: Date: ☐ Subdivision 4 Permit Taken By: Date Applied For: ☐ Site Plan ma October 18, 2000 GG Gay1e Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ 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 **Historic Preservation** □ Not in District or Landmark \*\*\* Call David Dobsen @ 408-6164 □ Does Not Require Review ☐ Requires Review PERMIT ISSUED WITH REQUIREMENTS 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 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 October 18, 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

<u>WITH REQUIREMENTS</u>

**CEO DISTRICT** 

3

PHONE: