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

Location of Construction:	Owner: Steven Scha		Phone:	Permit No: 058 4
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	L FERRET ISSUED
Contractor Name:	Address:		207) 375-7181 307) 731-1343	Permit Issued:
Past Use:	Proposed Use:	SUG. US	PERMIT FEE: \$ 35.00	9 1999 JUN 9
្តិកម្លាំង ៖ខ	Stade	FIRE DEPT. Apple Den	ied Use Group 9-3 Types	Zone: CBL:
Proposed Project Description:		Signature: PEDESTRIAN ACT	Signature: VIIII Signat	Zoning Approval:
Action: Approved Approved with Conditions Denied Action: Approved with Conditions Denied Action: Approved with Conditions Denied Signature: Date:			proved with Conditions: nied	Special Zone or Reviews: Shoreland Wetland Flood Zone Subdivision
Permit Taken By:	Date Applied For: 5.	5-99	Dutc.	☐ Site Plan maj ☐minor ☐mm ☐
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. Building permits do not include plumbing, septic or electrical work. 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 				Zoning Appeal □ Variance □ Miscellaneous □ Conditional Use □ Interpretation □ Approved □ Denied
PERMIT ISSUED WITH REQUIREMENTS 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 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				□ Approved □ Approved with Conditions ion, □ Denied
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF	WORK, TITLE		PHONE:	CEO DISTRICT
WH	nite-Permit Desk Green-Assessor's Cana	rv-D.P.W. Pink-Public	File Ivory Card-Inspector	, , ,