

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

Location of Construction: 21-23 Salem Street		Owner: Tim Madden		Phone: 773-5000 x 13		Permit No: 991297	
Owner Address: N/A		Lessee/Buyer's Name: N/A		Phone: N/A		BusinessName: N/A	
Contractor Name: Jim Messer		Address: P.O. Box 1864 Biddeford, ME 04005		Phone: 838-2899		Permit Issued:	
Past Use: 3 Family Dwelling		Proposed Use: Same		COST OF WORK: \$ 59,000 PERMIT FEE: \$ 378.00 FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: <i>RA</i> Type: <i>5B</i> <i>BOCA 96</i> Signature: <i>[Signature]</i>		Zone: <i>19-6</i> CBL: 057-K-024 Zoning Approval: <i>3 units of per micro project</i> Special Zone or Reviews: <i>3</i> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>11/22/99</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Proposed Project Description: Interior renovations to all 3 floors including window replacement.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____			
Permit Taken By: UB		Date Applied For: 11-16-99					

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

**Please Send To: Jim Messer
P.O. Box 1864
Biddeford, ME 04005

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

11-16-99

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: _____ *[Signature]*

PERMIT ISSUED WITH REQUIREMENTS CEO DISTRICT

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