

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

Location of Construction: 30 Gates Street 04101		Owner: [Handwritten Name]		Phone: 771-5370	Permit No: 990511
Owner Address: [Handwritten Address]		Lessee/Buyer's Name:		Phone:	BusinessName:
Contractor Name: [Handwritten Name]		Address: [Handwritten Address]		Phone: [Handwritten Phone]	
Past Use: [Handwritten Use]		Proposed Use: [Handwritten Use]		COST OF WORK: \$ 1,000	PERMIT FEE: \$ 15.00
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: A3 Type: SB BOCA 40
Proposed Project Description: [Handwritten Description]				Signature: _____	Signature: <i>[Handwritten Signature]</i>
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
				Action: Approved <input type="checkbox"/>	
				Approved with Conditions: <input type="checkbox"/>	
				Denied: <input type="checkbox"/>	
Permit Taken By: [Handwritten]		Date Applied For: 3-10-99		Date: _____	

PERMIT ISSUED
Permit Issued:
MAY 21 1999
CITY OF PORTLAND

Zone: CBL: [Handwritten]
Zoning Approval:
Special Zone or Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

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: _____

**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

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

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

CEO DISTRICT 