

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

Location of Construction: 365 Spring St		Owner: Lutes Chris		Phone:		Permit No: <b>980413</b>
Owner Address:		Lessee/Buyer's Name:		BusinessName:		
Contractor Name: CleanHarbors		Address: 17 Main St So. Ptld 04106		Phone: 799-8111		<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>PERMIT ISSUED</b>  <b>APR 27 1998</b>  <b>CITY OF PORTLAND</b> </div>
Past Use: Residential		Proposed Use: Same		<b>COST OF WORK:</b> \$ <b>PERMIT FEE:</b> \$ 10.00		
Proposed Project Description:  Remove 500 gal tank		<b>FIRE DEPT.</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>[Signature]</i>		<b>INSPECTION:</b> Use Group <i>83</i> Type: <i>U-1</i> Signature: <i>[Signature]</i>		Zone: <b>CBL</b> 061-B-001  Zoning Approval: <i>[Signature]</i> 4/23/98 <b>Special Zone or Reviews:</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <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"/>
				<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		
Permit Taken By: Sherry Pinard		Date Applied For: April 21, 1998				

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..

Mail to cleanharbors

**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 Matt Quinn <i>[Signature]</i>	ADDRESS: <i>[Signature]</i>	DATE: April 21, 1998	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE <i>operation mgn.</i>		799-8111	PHONE:

CEO DISTRICT 3  
*T.M. SM*