City of Portland, Maine - Building	g or Use Permit Application	n 389 Congi	ress Street, (04101, Tel: (207) 8	874-8703, FAX: 874-8716
Location of Construction: 177 Pine Street Portland, ME Owner: Estelle Lavoie Unit Owners of Will:		Phone: 791-3000 iamsburg Condominium Units		Permit No: 9 9 0 22 /	
Owner Address:	Lessee/Buyer's Name:	Phone:	Busines		PERMIT ISSUED
Contractor Name: Southpaw Design	Address: 253 Gray Road, Falmouth,	ME F			Pe mit Issued:
Past Use:	Proposed Use:	COST OF W	VORK:	PERMIT FEE: \$ 31.00	
Multifamily Residential Use	Same		. □ Approved □ Denied	INSPECTION:	CITY OF PORTLAND
		C: otumo	□ Denied	Use Group: Type:	Zene4 CBL: 063-F-008
Proposed Project Description:	1	Signature:	N ACTIVITIE	Signature: Y.C.S.DISTRICT (J.A.D.)	Zoning Approval
Erect replacement Sign (5x6)		Action:	Approved	with Conditions:	Special Zone or Reviews: Shoreland Wetland Flood Zone
		Signature:		Date:	□Subdivision
Permit Taken By: MG	Date Applied For:	2-22-9	9		☐ 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 					☐ Variance ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied
	****Estelle Lavoi 181 Pine St. Portland, ME		791–3000 W/7	PERMIT ISSUED TH REQUIREMENTS	Historic Preservation □ Not in District or Landmark □ Does Not Require Review □ Requires Review Action:
I hereby certify that I am the owner of record of the authorized by the owner to make this application a if a permit for work described in the application is areas covered by such permit at any reasonable ho	as his authorized agent and I agree to co issued, I certify that the code official's	onform to all appl authorized repres	by the owner of icable laws of the entative shall har	record and that I have bee is jurisdiction. In additior	☐ Approved with Conditions
		2-22-99			m 3/1/60
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	- VID 1/15/77
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE			PHONE:	CEO DISTRICT 3
White-Pe	rmit Desk Green-Assessor's Can	ary-D.P.W. Pini	k–Public File I	lvory Card–Inspector	