

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-0...

Location of Construction: 161 Pine Street		Owner: Gunnar Falk		Phone: 879-9770		Permit No. <b>960879</b>
Owner Address:		Leasee/Buyer's Name:		Business Name:		
Contractor Name: R. P. Morrison		Address: 270 Roosevelt Trail, Windham 04062		Phone: 892-9418		Permit Issued: <b>SEP - 5 1996</b> CITY OF PORTLAND
Past Use: 4 unit apartment		Proposed Use: Same w/int reno		COST OF WORK: \$ 5,790.00		
Proposed Project Description: Interior reno (Int stairway) as per plans		Signature: <i>[Signature]</i>		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <i>R2</i> Type: <i>5B</i> Signature: <i>[Signature]</i>
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		
Permit Taken By: Vicki Dover		Date Applied For: 8/21/96		Signature: _____ Date: _____		Zoning Appeal: <i>ok</i> <i>8/29/96</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>microfiche shows</i> <input type="checkbox"/> Wetland <i>the 4 units</i> <input type="checkbox"/> Flood Zone <i>ok'd by appeal</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <i>maj</i> <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
Permit Issued With Requirements		Permit Issued With Requirements		Zoning Appeal: <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied		

1. This permit application doesn't 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..

Call G. Falk for P/U 879-9770

**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 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 Gunnar Falk	ADDRESS: 270 Roosevelt Trail, Windham 04062	DATE: 8/21/96	PHONE: 892-9418
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector			PHONE: _____

*Administrative action*  
Action: *subject to separate review.*

Approved  
 Approved with Conditions  
 Denied

Date: *8/21/96*

*[Signature]*

CEO DISTRICT **3**  
*A. Power*