## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Permit No: 001308 Aveta States 753-1626 AS Vest Street Lessee/Buyer's Name: BusinessName: Owner Address: Phone: Permit Issued: Contractor Name: Address: Phone: Past Use: COST OF WORK: PERMIT FEE: Proposed Use: NOV 15 pm \$48,00 3,073.06 FIRE DEPT. Approved INSPECTION: Musta Landille ☐ Denied Use Group: Type: CBL: Zone: Proposed Project Description. Signature: Signature: Zoning Approval: 7. PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: Repair From Gerch (stairms Approved with Conditions: ☐ Shoreland Denied ☐ Wetland ☐ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Jet 31 1846 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation □ Not in District or Landmark PERMIT ISSUED WITH REQUIREMENTS □ Does Not Require Review ☑Řeguires Review Action: CERTIFICATION ☑ Áppoved ☐ Approved with Conditions 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 ☐ Denied 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 96: 31 2000 x DATE: SIGNATURE OF APPLICANT ADDRESS: 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