Cit	y of Portland, Maine	- Build	ling or Use Po	ermit A	Application	Per	rmit No:	Issue Dat	e:	CBL:		
389	Congress Street, 04101	Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		04-1607			064 A00	1001	
Location of Construction: Owner Name:						Owner Address:			Phone:	Phone:		
966 Congress St			Union Station Lmt Partnership			12 Brook St			(781)431-7	(781)431-7060		
Business Name: Con P.N			Contractor Name: P.M. Construction			Contr	Contractor Address:			Phone		
						19 Industrial Park Road Saco				207282769	97	
			Phone:	Phone:			Permit Type:				Zone:	
						Alterations - Commercial						
Past	t Use:		Proposed Use:			Permit Fee: Cost of Work:			rk:	CEO District:		
retail commercial space retail comm			-	rcial space with tenant		\$708.00		\$68,0	00.00	2		
			fit-up - Aaron's			THE PLANT			_	NSPECTION:		
						Approved 11s			se Group: Type			
							L	Denied		_		
Proi	posed Project Description:		l									
	nmercial space with tenan					Signature: Signature:		Signati	gnature:			
						PEDESTRIAN ACTIVITIES DISTRICT						
					Action: Approved App		proved w	oved w/Condition Denied				
						Signature:				Date:		
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval						
	nm		/2004			Zomig Approvai						
1.	This permit application	does not	praclude the	Spec	ial Zone or Revi	ews	vs Zoning Appeal			Historic Preservation		
1.	This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Shoreland			☐ Variance			☐ Not in District or Landm		
2.	Building permits do not include plumbing, septic or electrical work.		☐ Wetland			Miscellaneous			☐ Does Not Require Revie			
3.	Building permits are voi within six (6) months of			☐ Flood Zon			☐ Conditional Us			Requires Review		
	False information may in permit and stop all work.	nvalidate		Subdivision			☐ Interpretatio			Approved		
,			Site Plan			Approved			Approved w/Condition			
				Maj [Minor MM	☐ ☐ Denied			☐ Denied			
				Date:	Date:		Date:		D	Date:		
I ha juris shal	reby certify that I am the vector of the vector of the soliction. In addition, if a pull have the authority to entuch permit.	owner to	o make this appli r work described	med procession and the angle of the second s	as his authorized application is is	ne prop d agent sued, I	t and I agree certify that the	to conform he code offi	to all ar cial's au	oplicable laws of otherized repres	of this sentative	
O.C.	NATURE OF ARRAY				ADDDEC	C C		D. A. PPLY	7	70		
SIG	NATURE OF APPLICAN				ADDRES	3		DATI	2	P	НО	

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

ocation of Construction:		Owner Name:		Owner Address:		Phone:	
966 Congress St		Union Station Lmt Par	tnership	12 Brook St		(781)431-7060	
Business Name:		Contractor Name:		Contractor Address:		Phone	
		P.M. Construction		19 Industrial Park Road Saco		2072827697	
essee/Buyer's Name		Phone:		Permit Type:	Zone		
				Alterations - Commercia	al		
Dept: Zoning Note:	Status:	Approved with Condition	ns Reviewer	: Marge Schmuckal	Approval Dat	e: 11/0 Ok to Issue	01/2004
	-	ed for any new signage.				C	
2) This permit is being a work. Dept: Building	pproved o			ations shall require a sepa	Approval Dat	e: 11/0	04/2004
2) This permit is being a work.	pproved o	on the basis of plans subm			Approval Dat		04/2004
2) This permit is being a work. Dept: Building Note:	pproved o	on the basis of plans subm	ns Reviewer		Approval Dat	e: 11/0 Ok to Issue	04/2004 : 🔽
2) This permit is being a work. Dept: Building Note: 1) NO HVAC equipment	Status:	on the basis of plans subm	ns Reviewer nd are not a part	: Mike Nugent of this permit. A separate	Approval Dat	e: 11/0 Ok to Issue ed for any s	04/2004 : 🔽
2) This permit is being a work. Dept: Building Note: 1) NO HVAC equipment equipment.	Status:	Approved with Condition	ns Reviewer nd are not a part	: Mike Nugent of this permit. A separate	Approval Date	e: 11/0 Ok to Issue ed for any s	04/2004 :
2) This permit is being a work. Dept: Building Note: 1) NO HVAC equipment equipment. Dept: Fire	Status: splans we Status:	Approved with Conditionare submitted for review are Approved with Conditionare with	ns Reviewer and are not a part ns Reviewer	: Mike Nugent of this permit. A separate : Lt. MacDougal	Approval Date	e: 11/0 Ok to Issue ed for any s	04/2004 :
2) This permit is being a work. Dept: Building Note: 1) NO HVAC equipment equipment. Dept: Fire Note: 1) fire extinquishers shal	Status: splans we Status:	Approved with Conditionare submitted for review are Approved with Conditional Approved with Conditional ded in accordance with N	ns Reviewer nd are not a part ns Reviewer	: Mike Nugent of this permit. A separate : Lt. MacDougal	Approval Date	e: 11/0 Ok to Issue ed for any s	04/2004 : 🗹 uch
2) This permit is being a work. Dept: Building Note: 1) NO HVAC equipment equipment. Dept: Fire Note: 1) fire extinquishers shal	Status: splans we Status:	Approved with Conditionare submitted for review are Approved with Conditionare with	ns Reviewer nd are not a part ns Reviewer	: Mike Nugent of this permit. A separate : Lt. MacDougal	Approval Date	e: 11/0 Ok to Issue ed for any s	04/2004 :

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 provision of the code(s) applicable to such permit.

DECRONGING E DEDCOM IN CHARGE OF WORK THE	DATE	DIIO	
SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО