

Revised Desc App

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Address/Location of Construction:		. JOHN'S ST.)
Total Square Footage of Proposed Structu	ure: +/- 9,500sf	
Chart# Block# Lot#	Applicant Name: PM CONSTRUCTION Address 19 INDUSTRIAL PARK RD City, State & Zip SACO, ME 04072	201-282-7697 Email: glaplume pmcaustruc
11 /	Contractor Name: if different from Applicant) Address: City, State & Zip: Telephone & E-mail:	Cost Of Work: \$ 39,000 C of O Fee: \$ Historic Rev \$ Total Fees: \$
Amounded Description per nt w/ Jean Puture tenant space to the right side for this new space yet. The tenant wi Who should we contact when the permit is readdress: 19 INDUSTRIAL PARK City, State & Zip: SACO, ME OUE E-mail Address: 9/9 PMCOO	please name OLF NEW DEMISING WALL A. OLF NEW DEMISING WALL A. OLF NEW DEMISING WALL A. MICH 9/8 - Demising well is Sei Lifthe Cuttolic Charters Susine Mget a separate Demit to finish; ady: GEORGEE LAPLIME; J. PD. OTZ OSTRUCTION. COM	in suilt to create a 35. There is no tenant He new space.
Telephone: 207-282-7697 Please submit all of the information o causes an	(a) 267-279-800 putlined on the applicable checklis automatic permit denial.	
In order to be sure the City fully understar Department may request additional informati download copies of this form and ot www.portlandmaine.gov, or stop by the Inspec	ther applications visit the Inspect ctions Division office, room 315 City Hal	ions Division on-line a l or call 874-8703.
I hereby certify that I am the Owner of recorproposed work and that I have been authorized agree to conform to all applicable laws of the application is issued, I certify that the Code Oareas covered by this permit at any reasonable in the code of the covered by this permit at any reasonable.	rd of the named property, or that the or d by the owner to make this application a his jurisdiction. In addition, if a perm Official's authorized representative shall	wner of record authorizes the his/her authorized agent. it for work described in the have the authority to enter a

Signature: Date: 9-5-14

This is not a permit; you may not commence ANY work until the permit is issued.



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Address/Location of Construction:	66 CONGRESS ST (244 ST	. JOHN'S ST.		
Total Square Footage of Proposed Struc		ato		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant Name: PM CONSTRUCTION Address	Telephone: 201-282-7697		
6 4 AI	19 INDUSTRIAL PARK RD City, State & Zip SACO, ME 04072	Email: glaplume & proconstruction.		
Address: (BUB CONNOR)	Contractor Name: (if different from Applicant) Address:	Cost Of Work: \$ 39,000 C of O Fee: \$		
17 BROOK RO. City, State & Zip: WELLESLEY, MA 07487 Telephone & E-mail:	City, State & Zip: Telephone & E-mail:	Historic Rev \$		
jrconner 1 Querron net		Total Fees:\$		
If vacant, what was the previous use? Proposed Specific use: THREAD Is property part of a subdivision? NO If ye Project description: NSTALL +	os of Hoff s, please name	ND BUILD (1)		
Who should we contact when the permit is ready: GEORGE LAPLUME, JR.				
Address: 19 INDUSTRIAL PARK RD.				
City, State & Zip: SACO, ME OF E-mail Address: glaplume & PMCO				
		77 (1)		
Please submit all of the information	outlined on the applicable checklish automatic permit denial.	t. Failure to do so		
In order to be sure the City fully understand Department may request additional information lownload copies of this form and c	tion prior to the issuance of a permit. F	or further information or to ions Division on-line at		

] 1 www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

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0: \	1 1 1	. / L	Date: 4.5.14	
Signature:	Mr. Jan		Date: / J	
	100 90			

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