City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: Owner Address: Lessee/Buver's Name: Phone: BusinessName: Phone: Address: Contractor Name: COST OF WORK: NOV - 5 1959 Proposed Use: PERMIT FEE: Past Use: INSPECTION: FIRE DEPT. □ Approved Use Group & Type 5 ☐ Denied CBL: Zone: MOCO96 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 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 □ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work... ☐ Denied Historic Preservation □ Not in District or Landmark □ Does Not Require Review PERMIT ISSUED WITH REQUIREMENTS □ Requires Review Action: CERTIFICATION ☐ Appoved 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 ☐ Approved with Conditions ☐ 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 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

CHEP HORSERUL REMENTS

COMMENTS

11-10-99 went to the Building to check the Plumbing with Dave the Plum will change So Hat 4" has a clean out Re Set the pitch on waste Line vent the tub (TR) 1116/100 Complete-Close at 96	1 1 2
Ven. (the tab (TN)	bur he
Vent the tab (11)	and Back
11/6/00 Complete-Close out 96	
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Inspection Record	T D 4
Type	Date
Foundation:	
Framing: Plumbing:	
Final:	
Other:	