

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 64 Gray Street		Owner: Perregine Corp		Phone: 879-0847		Permit No: <b>001251</b>	
Owner Address: Free Street		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: *** R.S, Carter Const.		Address: *** 838-9395***		Phone: 874-0000		Permit Issued:	
Past Use: <del>XXXX</del> Multi family		Proposed Use: same		COST OF WORK: \$ 7,200		PERMIT FEE: \$ 78.00	
Proposed Project Description: Fire Escape <i>rebuild, reconfiguration of Existing</i>		Signature: <i>[Signature]</i>		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group <i>2</i> Type: <i>5B</i>	
				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
Permit Taken By: JA		Date Applied For: Octr 23 2000		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zone: <i>7D</i> CBL: 064-I-001 Zoning Approval: <i>7 units ok per microtiche</i> <i>to remain</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>7D.U</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>OL</i> <input type="checkbox"/> Subdivision <i>10/31/00</i> <input type="checkbox"/> Site Plan major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> <i>sec. 14-440</i>	

1. This permit application does not 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..

**PERMIT ISSUED WITH REQUIREMENTS**

**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 provisions of the code(s) applicable to such permit

Oct 23 2000 K

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: *to D.A. 10/23*  
*WBN*  
*11-200*

**PERMIT ISSUED WITH REQUIREMENTS**

**WDC DISTRICT**

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COMMENTS

11/13/00 Met contractor on site. Checked some tube depths. OK. to ~~B~~ Puck. Went over all permit requirements. OK. to proceed. Contractor to call when framed for

3/5/07  
Closed  
AR

Inspection Record	
Type	Date
Foundation: _____	_____
Framing: _____	_____
Plumbing: _____	_____
Final: _____	_____
Other: _____	_____