## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Catamount Dairy Holdings Phone: Permit No: 04101 c/o H.P. Hood & Sons Inc. 349 Park Avenue 99106 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA N/A Permit Issued: Address: Contractor Name: Phone: Richard Miller Center Line Const. Inc. P.O. Box 1264 Portland, ME 04104 865-3300 COST OF WORK: PERMIT FEE: SEP 2 Proposed Use: Past Use: \$ 79,325 \$ 504.00 DAiry Same INSPECTION: ひ FIRE DEPT. Approved ☐ Denied Use Group: 7 Type: CBL: 066-D-001 Signature: Proposed Project Description: PEDESTRIÁN ACTIVITIES DISTRICT (I Concrete pad for 40.000 gal SS milk tank and connecting Action: Approved Special Zone or Reviews Approved with Conditions: Hallway. ☐ Shoreland *M* Denied П □Wetland ☐ Flood Zone → □ Subdivision Signature: Date: ASite Plan mai □minor □mm □ Permit Taken By: Date Applied For: ub 9-22-99 ELLICATIN DE This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 瓜Variance \ り/こ `□ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. ☐ Interpretation Approved tion may invalidate a building permit and stop all work... \*\*\*Call for P/U Richard Miller 865-3300 Denied Mistoric Preservation ZBA Approval 9/16/99 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 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, □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 9-23-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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

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