

Location of Construction: 85 St James St, Portland ME 04101		Owner: Goodman Co		Phone: 761-7788		Permit No: 000515
Owner Address: Gibson Road, Scarborough ME		Lessee/Buyer's Name: Gilman Electric		Phone: 846-3505		
Contractor Name: Dahlgren Co		Address: Rte 1, Yarmouth ME		Business Name:		Permit Issued:
Past Use: Commercial		Proposed Use: SAME		COST OF WORK: \$ 4200.00		
				PERMIT FEE: \$ 120.00		Zone: IM CBL: 066-D-004 Zoning Approval: 17 May 2K OK
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		
Proposed Project Description: Build wheelchair ramp to existing stairs.		Signature: <i>[Signature]</i>		INSPECTION: Use Group: <i>M</i> Type: <i>2C</i> <i>BOCA 99</i> Signature: <i>[Signature]</i>		Section 14-250 Special Zone or Reviews: <input type="checkbox"/> Shoreland 25' side yard <input type="checkbox"/> Wetland 1' front of block <input type="checkbox"/> Flood Zone High-OK <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature: _____ Date: _____		
Permit Taken By: DM		Date Applied For: NC 5/16/00				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Date: _____

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

SIGNATURE OF APPLICANT	ADDRESS:	DATE: 5/16/00	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

PERMIT ISSUED WITH REQUIREMENTS