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: 0 0 0 2 A TONE JO 777-3-31 Wife - 1221-11 12016 きまでき来る Phone: Owner Address: Lessee/Buyer's Name: BusinessName: Permit Issued: Phone: Contractor Name: Address: COST OF WORK: Proposed Use: PERMIT FEE: Past Use: FIRE DEPT. □ Approved INSPECTION: ☐ Denied Use Group: 13 Type: 573 Zone: BOCAGG CBL: (18 Com Was + 6) Signature: Signature: 7 Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. Action: Approved Special Zone or Reviews: Partie o 10 nonecet Approved with Conditions: ☐ Shoreland Denied □Wetland ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: ాంజరంలా చ్యార్థికి కార్మాన్స్ కార్మాన్స్ కార్మాన్స్ కార్మాన్స్ -2470 34 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. 2. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... ☐ Denied **Historic Preservation** □ Not in District or Landmark ☐ Does Not Require Review □ 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit dere ber of, diff SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector