City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: 59 Roberts Street - 3rd floor Owner: Phone: ******874-4979 Permit No: Craig Lapine***** 000730 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Permit Issued: Contractor Name: Address: Phone: **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: JUL - 7 2000 \$ 126.00 \$ 16,500 **FIRE DEPT.** □ Approved **INSPECTION:** 2-unit same Use Group: 9-3 Type: 5/3 ☐ Denied CBL: 066A-B-016 BOCA 991 Signature: Signature: Zoning Approval: 2mi Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PLAID.) Action: Approved Finish third floor Approved with Conditions: Denied □ Wetland 2 bedrooms 1 bathroom ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Kathy July 5, 2000 N **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. 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... □ Denied Historic Preservation Please call Craig when ready 874-4979 12/Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS **CERTIFICATION** ☐ Appoved ☐ Approved with Conditions 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 □ 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: PHONE: PERMIT ISSUED

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

| PERMIT ISSUED | |**VEED BUSCHREE**MENTS

PHONE: