## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: MMC Realty Corp. Phone: Permit No: 576 St. John Street Attn: Bob Cloutier 871-2139 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 22 Bramhall Street Ptld, ME 04102 Permit Issued: Contractor Name: Address: Phone: To Be determined JUN 28 **COST OF WORK:** Past Use: Proposed Use: PERMIT FEE: \$ 3,000 35.00 Office Same **FIRE DEPT.** □ Approved INSPECTION: Use Group: 18/1/Type: 5/2 ☐ Denied CBL:080-B-003 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P Place a modular office next to the existing building for, Action: Approved a period not to exceed one year. (from dated 155mmen) Approved with Conditions: ☐ Shoreland Denied П ☐ Wetland ☐ Flood Zone Signature: ☐ Subdivision Date: ■ Site Plan maj □minor □mm □ Permit Taken By: Date Applied For: IJΒ June 23, 1999 7 See JacGiran Note Zoning Appeal No □ 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. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation tion may invalidate a building permit and stop all work.. ☐ Approved ☐ Denied \*\*\*Send to Winton Scott ARchitects Historic Preservation 5 Milk Street INot in District or Landmark Portland, ME 04101 774-4811 ☐ 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 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 June 23, 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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

**CEO DISTRICT** 

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