

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 415 Forest Avenue		Owner: University Credit Union		Phone: 772-1906		Permit No: 980417
Owner Address: 391 Forest Avenue Portland		Lessee/Buyer's Name:		Phone:		
Contractor Name: Thomas Fitzgerald		Address: 291 Sawyer St., So. Portland, ME		Phone: 799-4052		Permit Issued: Zone: B-2 CBL: 111 C 005 Zoning Approval: <i>of - Sup. permit</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>req. for</i> <input type="checkbox"/> Wetland <i>Salvage</i> <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <i>4/27/98</i>
Past Use: family commercial		Proposed Use: family commercial		COST OF WORK: \$ 2,000 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: <i>M</i> Type: <i>BOCA96</i> Signature: <i>[Signature]</i>		
Proposed Project Description: interior renovations		Permit Taken By: Judy Laplante		Date Applied For: 4/27/98		

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: see pre-application 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

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: 4/27/98

[Signature]

CEO DISTRICT 6
m. leary