City of Portland, I	Maine - Buil	ding or Use	Permit Applica	tion	Permit No:	Issue Date:	CF	BL:	
389 Congress Street,	_			2013-02781		1	114A A001001		
Location of Construction:		Owner Name:			r Address:		Pho	one:	
96 FALMOUTH ST		UNIVERSITY OF MAINE		107 MAINE AVE BANGOR, ME 04401					
Business Name:		Contractor Name:		Contractor Address:			Pho	Phone	
University of Southern Maine		TBD							
Lessee/Buyer's Name		Phone:		Permit Type: Alterations - Commercial				one:	
Past Use:		Proposed Use:		Permit Fee: Cost of Work:			B2	B2 R5 CEO District:	
State University		Same: State U:	nivorcity	reriii	\$780.00 \$76,0			4	
		Zamo Zamo Cin Gisty		INSPECTION:					
Proposed Project Description	on:								
Fit-up of 1200 sf inclu	•								
architectural finishes.	2nd Floor Scie	nce Bldg "C" wi	ng USM Cyber	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
Security Lab			Action: Approved Approved w/Conditions Denied						
			Signature:						
Permit Taken By: bjs	it Taken By: Date Applied For: 12/23/2013			Zoning Approval					
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Special Zone or Reviews		Zoni	Zoning Appeal		oric Preservation	
					☐ Variance	ee	Not in District or Landman		
 Building permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. 			☐ Wetland		Miscell	aneous	Does Not Require Review		
			Flood Zone		Conditi	Conditional Use		uires Review	
False information permit and stop al	-	a building	☐ Subdivision		Interpre	_ Interpretation _		Approved	
			Site Plan		Approv	Approved [Approved w/Conditions	
	Maj		Denied	☐ Denied		Denied			
	Date:		Date:	Date:		Date:			
I hereby certify that I a I have been authorized jurisdiction. In additionshall have the authority such permit.	by the owner to n, if a permit fo	o make this appl or work describe	ication as his autho d in the application	nat the rized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to a	all applical al's authori	ble laws of this ized representative	
SIGNATURE OF APPLICANT			ADDRESS			DATE		PHONE	