City of Portland, M		O			Permit No:	Issue Date:	CBL:
389 Congress Street, (	14101 Tel: (2		, Fax: (207) 874-8		2014-02184		114A G010001
Location of Construction: 29 BEDFORD ST (Woodbury Campus Center)		Owner Name: UNIVERSITY OF MAINE		Owner Address: 107 MAINE AVE BANGOR, ME 04401		Phone:	
Business Name: USM - University of So Maine	outhern						
Lessee/Buyer's Name		Phone:		Permit Type:			Zone:
				Alterations - Commercial			B2
Past Use: State University		Proposed Use: Same: State U	niversity	Permit Fee:   Cost o		Cost of Work: \$100,0	00.00 CEO District:
				INSPECTION:			
Proposed Project Description installation of photovol		oof of Woodbu	ry Campus Center				
including structural stee		· * · · · •		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: Approved Appro		ved Approv	ed w/Conditions Denied		
				S	ignature:		Date:
Permit Taken By: Date Applied For: 1dobson 09/19/2014				Zoning Approval			
1. This permit applica	preclude the	Special Zone or R	eviews	Zoni	ng Appeal	Historic Preservation	
Applicant(s) from Federal Rules.			Shoreland		☐ Varianc	ee	Not in District or Landmar
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscell	aneous	Does Not Require Review
3. Building permits as within six (6) mont	☐ Flood Zone		Conditi	onal Use	Requires Review		
False information repermit and stop all	Subdivision		Interpre	etation			
	Site Plan		Approv	ed	Approved w/Conditions		
	Maj Minor MM		Denied		☐ Denied		
	Date:		Date:		Date:		
I have been authorized by jurisdiction. In addition	y the owner to , if a permit fo	o make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to t the code offici	y the owner of record and that all applicable laws of this ial's authorized representative on of the code(s) applicable to
SIGNATURE OF APPLICAL	ADDRESS			DATE	PHONE		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						DATE	PHONE