City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: Owner: Phone: Location of Construction: 470 Forest Ave BusinessName: Leasee/Buyer's Name: Phone: lessee: Owner Address: 775-4738 470 Forest Ave- Ptld ME 0410 Image Set Design Inc Permit Issued Phone: Address: Contractor Name: 845-0042 Box 1264- Ptld ME 04104 Center Line Construction Inc DEC 2 6 1995 PERMIT FEE: COST OF WORK: Proposed Use: Past Use: \$ 25 1200 office space office space **FIRE DEPT.** □ Approved INSPECTION: Use Group B Type 3 w intr renyta ☐ Denied Signature: Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (Action: Approved Special Zone of Reviews: construct vestibule Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone ☐ Subdivision Date: Signature: ☐ Site Plan maj ☐ minor ☐ mm ☐ Date Applied For: Permit Taken By: L Chase 12/22/95 Zoning Appeal □ Variance This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use 2. □ Interpretation Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Approved tion may invalidate a building permit and stop all work.. ☐ Denied Historic Preservation □ Not in District or Landmark Does Not Require Review ☐ Requires Review Action: □ Appoved CERTIFICATION ☐ 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 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 PHONE: ADDRESS: DATE: SIGNATURE OF APPLICANT PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE CEO DISTRIC

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

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