## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: DAJ, Inc. 79 Falmouth St Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Contractor Name: Address: Phone: DAJ, Inc. P.O. Box 6577 Scarborough, ME 04070 883-3770 APR | 5 |998 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: 2,000.00 35.00 FIRE DEPT. Approved INSPECTION: Use Group 2 Type: 5/3 Illegal 9-Family Legal 6 Family ☐ Denied Zene: CBL: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Special Zone pr Reviews: Action: Approved Change Use Approved with Conditions: ☐ Shoreland 4 Denied ☐ Wetland Make Interior Renovations ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Mary Gresik 08 April 1998 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. □ Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation ☐ 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: CERTIFICATION ☐ Appoved 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 ☐ Approved with, Conditions ☐ 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 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 08 April 1998 **ADDRESS:** DATE: PHONE: Jeff Oddv RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

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

CEO DISTRICT