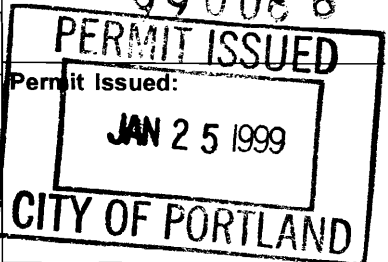


City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 156 Woodford St		Owner: Dean Johnson		Phone:		Permit No: 990066	
Owner Address: SAA 04103		Lessee/Buyer's Name: Reo Window Shade		Phone:		BusinessName:	
Contractor Name: Centerline Construction		Address: P.O. Box 1264 Ptld, ME 04104		Phone: 865-3300		Permit Issued: JAN 25 1999	
Past Use: Commercial/Office Space		Proposed Use: Same		COST OF WORK: \$ 5,900.00		PERMIT FEE: \$ 50.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B Type: 313 BOCA 96	
Proposed Project Description: Make Interior Renovations - Construct Stairway				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
Permit Taken By: MG		Date Applied For: 22 January 1999		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: B2 CBL: 125-F-005	
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		Zoning Approval: <i>interior only</i> Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>OK</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>1/25/99</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	



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

22 January 1999

SIGNATURE OF APPLICANT 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: *[Signature]*

CEO DISTRICT **3**
TR/mw