City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Permit No: 772-1011 04101 Richard Nellson 163 Pleasant Ave. Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 04102 Dr. Alan Rich, Jr. 27 Bayview Dr. Permit Issued: Contractor Name: Address: Phone: 657-6450 Coastal Mill Work .H 261999 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: Dr. Office - 1st. Flr. 25,000,00 174.00 2 Apts. Above Same FIRE DEPT. Approved INSPECTION: Use Group # 183 Type: 5 12 □ Denied Zone: CBL: 132-J-010 BOCA 9'C Milter Signature: Zoning Approval: Michigan Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PARD.) Action: Approved Approved with Conditions: Interior Renovations (Work Is Done) ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: July 23,1999 KA Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. □ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... □ Denied **Historic Preservation** Please Contact Dr. Alan Rich □ Not in District or Landmark 163 Pleasant Ave. 772-1011 □ Does Not Require Review If Any Questions Or Problems (SAM) ☐ Requires Review PERMIT ISSUED WITH REQUIREMENTS 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 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, □ Denied 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 SIGNATURE OF APPLICANT ADDRESS: PHONE:

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

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

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CEO DISTRICT