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: 001324 Owner Address: Lessee/Buyer's Name: BusinessName: Phone: 283 Permit Issued: Address: Phone: Contractor Name: S 3 5 **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: NOV | 7 2000 \$ 30.00 \$ 1,000 **FIRE DEPT.** □ Approved **INSPECTION:** -42-0 Use Group: // Type: 52 ☐ Denied CBL: Zone: BOCA94 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (Action: Approved Special Zone or Reviews: SMIL SHED Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 140% (量 137%) **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use □ 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 CERTIFICATION Thereby 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 agree to all agree to conform to all agree to all agree to agree to all agree to Action: ☐ Appoved □ 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit ADDRESS: SIGNATURE OF APPLICANT PHONE:

PHONE:

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE