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:			
the waveto sc.		<u> </u>		27 kgs33	- 0.04	100	
Owner Address:	Lessee/Buyer's Name:	Phone:	Busines	sName:	AOT	100	
<u> </u>		l			Permit Issue		
Contractor Name:	Address:	Phor	ne:		Permit issue	3G:	
Age of the grant of the same	173 - 110 110 - 11	COCT OF WOL		PERMIT FEE:	ern 2	2 8 2000	
Past Use:	Proposed Use:	COST OF WOR		1	JEP 2	. 0 2000	
		\$ 55, 200, 20		\$ 154. 3	_		
				INSPECTION: Use Group: U Type: 5/3			
for the Community	5 .		☐ Denied		7		
					Zone: CBI	L: - 135-0- :1	
Description		Signature:		Signature: Hoffee	Zoning Appro		
Proposed Project Description:		PEDESTRIAN A	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Appro	Jvai.	
		Action:	Approved		Special	Zone or Reviews:	
. f., e. e. e. e. e.							
			Denied		□ Wetland		
					☐ Flood Zo		
		Signature:	Signature: Date:		☐ Subdivision☐ Site Plan maj ☐minor ☐mm ☐		
Permit Taken By:	Date Applied For:				LI Site Plan	ı maj ∐minor ∐mm	
		The trace of the state	·		70	ning Appeal	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.					□ Variance		
						□Miscellaneous	
· · · · · · · · · · · · · · · · · · ·	Building permits do not include plumbing, septic or electrical work.						
C 1	void if work is not started within six (6) months of the date of issuance. False informa-						
tion may invalidate a building permi	t and stop all work				Approve	d	
					□Denied		
					Histor	ic Preservation	
	PERMIT ISSUED PERMIT ISSUED WITH REQUIREMENTS □ Not in District or Landma □ Does Not Require Review □ Requires Review						
			WITHR	EQUIREMENTS	☐ Requires	Review	
			44,				
					Action:		
	CERTIFICATION				□Appoved	4	
I hereby certify that I am the owner of reco	ord of the named property, or that the propose	ed work is authorized by t	he owner of	record and that I have been	,	d with Conditions	
	olication as his authorized agent and I agree t					T Will Conditions	
	ication is issued, I certify that the code offici						
1	onable hour to enforce the provisions of the			To the authorny to enter an	Date:		
arous covered by such permit at any reason	7 Pro	ocas(o) approacts to such	poz				
					1		
			To see a long of the second of		_		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	PERMIT ISSUED		
				W	TH REQUIREMEN	12	
RESPONSIBLE PERSON IN CHARGE O	OF WORK, TITLE			PHONE:	_ i	f . i	
MEDI ONDIDEE I EMBON IN CIR MOD C	· · · · · · · · · · · · · · · · · · ·			A A KOL TEA	CEO DISTI	KICT	
V	Albita Barmit Dock Groom Accessor's	Canani D.D.M. Bink B	ublia Cila	brane Cand Inchester	1	l l	

COMMENTS

10-6-2000 - Pre-con on site of contractor went over all veg Fudu willowly be approx 12" from reg. (8') - Told him to have strings from the pins. And Also he needs design steel specs.
uprox 12" from reg. (8') - Told him to have strings from the pins, ran
Man he meds Lisian steel speces
10/11/00 Founds How Jos backs () K (D)
12.20.00 Framing MSP- 2 /2 wall surrounding stairs has
10/11/00 Foundation Istocks OK (D) 12.20.00 Framing Insp- 0 12 wall surrounding stairs has to be 42"- Stairs-one run not cut to meet 10"- discussed Corrections w/axel. He stated all would be corrected.
arachia devel the child all would be corrected
Corrections w/ wher. He started all would be corrected.
Inspection Record
Type
Foundation:
Framing:Plumbing:
Plumbing: Final:
Other: