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: 115 Glecker Rd. ***** ***James Rich 879-4020 Phone: BusinessName: Owner Address: Lessee/Buyer's Name: Same Peimit Issued: Phone: Contractor Name: Address: XXXXXXXX 475 Killings Rd. Cumberland ME 04021 829-5820 Alan Rich **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: JUN 2 6 INSPECTION: **FIRE DEPT.** □ Approved Use Group: 9-3 Type: 5 B ☐ Denied s/f same CBL: BOC 499 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P. Action: Approved Approved with Conditions: □ Shoreland Denied Raise roof □ Wetland ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 6/22/00 Gay1e **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. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation Not in District or Landmark PERMIT ISSUED WITH REQUIREMENTS ☐ Does Not Require Review □ Requires Review Action: **CERTIFICATION** ☐ Appoved ☐ Approved with Conditions 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, □ 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 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