

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

Location of Construction: 760-772 Stevens Avenue		Armory	**	Owner: Contact Person: Scottie Wilcox	Phone: **339-9520 (207)	Permit No: 000200
Owner Address: P.O. Box 280 E. Lebanon Maine		04027	Lessee/Buyer's Name: N/A	Phone: N/A	Business Name: N/A	ISSUED
Contractor Name: N/A		Address: N/A		Phone: N/A		Permit Issued: MAR 17
Past Use: Armory		Proposed Use: Same		COST OF WORK: \$ 0	PERMIT FEE: \$ 30.00	OFF PORTLAND
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: BOCA 99	
Proposed Project Description: Maine Native American Appreciation Day, Spring Festival to be held on March 25, 2000 and March 26, 2000 only.				Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	Zone: R-5 CBL: 145-B-018
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Approval: <i>[Signature]</i> 3/16/00
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: UB		Date Applied For: 3-14-00				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

***Call Scottie for pick up: 207-339-9520

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

3-14-00

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

PERMIT ISSUED WITH REQUIREMENTS

Action:
 Approved
 Approved with Conditions
 Denied

Date: _____

PERMIT ISSUED WITH REQUIREMENTS

CEO DISTRICT
UB

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