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: 04103 Central Maine Power Co. 623-3521 162 Canco Road 000962 Phone: Owner Address: Lessee/Buyer's Name: BusinessName: August ME 04330 N/A 83 Edison Dr. Permit Issued: Contractor Name: Address: Phone: Stamley Elevator/ Others N/A AUG 3 1 2000 COST OF WORK: PERMIT FEE: Proposed Use: Past Use: \$ 200,000.00 \$ 1,224.00 Same Power CO. Office Building FIRE DEPT. Approved INSPECTION: Use Group: Type: 219 ☐ Denied BOC 899 146-A-006 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Renovations for and Installation of a Approved with Conditions: ☐ Shoreland New Elevator Denied ☐ Wetland ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: August 29,2000 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ 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 Address MAIL *** PLease call Name & NO on Attached card for **Historic Preservation** ☑Not in District or Landmark P/U****** ☐ Does Not Require Review PERMIT ISSUED WITH REQUIREMENTS ☐ Requires Review 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 □ 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 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:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

NICEO DISTRICT