City of Portland, Main	e - Building or Use	Permit Applicat	ion	Permit No:	Issue Date:	CBL:
389 Congress Street, 0410	1 Tel: (207) 874-8703	Fax: (207) 874-8	716	2014-01782		146 C005001
Location of Construction:	Owner A		er Address:		Phone:	
777 STEVENS AVE HOME I		R THE AGED		777 STEVENS AVE PORTLAND, 04103		, ME (207) 797-7710
Business Name:						I
Lessee/Buyer's Name	Phone:			it Type:	Zone:	
				erations - Comn	R6	
Past Use:	Proposed Use:			Permit Fee: Cost of Work:		CEO District:
total residential congregate cunits in original building and		Same: total residential congregate care units in original building and addition is 160 units		\$4,183.00	00.00 7	
addition is 160 units				INSPECTION:		
Proposed Project Description: Alterations, which include the	ne renovation and upgrad	le of both the				
kitchen and bathroom areas		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
occupied apartments located	venth Floors.	Action: Approved Approved w/Conditions Denied				
			S	ignature:	Date:	
Permit Taken By:		Zoning Approval				
	08/08/2014	Special Zone or Reviews		Zoni	ing Appeal	Historic Preservation
<ol> <li>This permit application Applicant(s) from meetin Federal Rules.</li> </ol>		Shoreland		☐ Variano		Not in District or Landmar
Building permits do not septic or electrical work	☐ Wetland		Miscell	aneous	Does Not Require Review	
3. Building permits are volume within six (6) months of	Flood Zone		Conditi	onal Use	Requires Review	
False information may i permit and stop all work	☐ Subdivision ☐ Site Plan		Interpre	etation	Approved	
			Approv	red	Approved w/Conditions	
	Maj Minor MM		Denied		Denied	
	Date:		Date:		Date:	
		CEDTIFICA	TIO	AT.		
I haraby cartify that I am tha	owner of record of the n	CERTIFICA			is outhorized by	the owner of record and the
I hereby certify that I am the I have been authorized by the jurisdiction. In addition, if a	e owner to make this apple permit for work describe	lication as his authored in the application	ized a	agent and I agree ued, I certify tha	e to conform to a t the code officia	all applicable laws of this al's authorized representative
shall have the authority to en such permit.	ter all areas covered by s	uch permit at any re	asona	oie nour to enfo	ice the provision	n of the code(s) applicable to
SIGNATURE OF APPLICANT	ADDRESS			DATE	PHONE	
RESPONSIBLE PERSON IN CHA	PGE OF WODE TITLE				DATE	PHONE
TEST CHOIDED I ERSON IN CHA	MOL OF WORK, IIILE				DAIL	LITONE