City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Phone: Location of Construction: Owner: Permit Ng: 8 0 4 4 0 1108 Forest Avenue Lloyd Wolf & Robert Adam 773-4988 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: DEPT. OF BUILDING INSPECTION P. O. Box 1382 Portland, ME PerMITY OF PORTLAND, ME Contractor Name: Address: Phone: Les Wilson & Sons Box 1028, Westbrook, ME COST OF WORK: PERMIT FEE: Past Use: Proposed Use: 10.00 FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: Type: CBL: Signature: Signature: A Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Approved with Conditions: ☐ Shoreland removal of 550 gal underground tank Denied П □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: Judy Laplante 4/29/98 **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 ☐ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Approved tion may invalidate a building permit and stop all work... □ Denied **Historic Preservation** □ Not in District or Landmark ☐ 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 □ 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 see pre-app 4/29/98 SIGNATURE OF APPLICANT ADDRESS: DATE: 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

CEO DISTRICT 6