City of Portland, Maine – Bu	ilding or Use Permit Applicati	ion 389 Congress S	treet, 04101, Tel: (207) 8	374-8703, FAX: 874-8716	
Location of Construction: Owner:		Phone: 773~1353		Permit No:	
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	001042	
Contractor Name:	Address:	Phone:		Permit Issued:	
Past Use:	Proposed Use:	COST OF WORK:	PERMIT FEE:	SED I D coop	
		\$ 1,000.76	\$ 36.58	SEP 1 8 2000	
Sin. Te Britis.	Typin Agric	FIRE DEPT. □ Approved □ Denied		Zone: CBL: 155-0-000	
		Signature:	Signature:	, <u> </u>	
Proposed Project Description:	<u> </u>		TIVITIES DISTRICT (P.A.D.)	Zoning Approval:	
್ನಶ್ವಾಗ ತಂದಿ		Action: Approved		Special Zone or Reviews:	
		Approved with Conditions:		☐	
		Signature:	Date:	□Subdivision	
Permit Taken By:	Date Applied For:	Segtomber 15,	1.5.34. (26)	☐ Site Plan maj ☐minor ☐mm ☐	
tion may invalidate a building permit	closed	m 3 3 s - The most on year of the State	PERMIT ISSUED WITH REQUIREMENTS	☐ Interpretation ☐ Approved ☐ Denied Historic Preservation ☐ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: ☐ Appoved	
I hereby certify that I am the owner of recor authorized by the owner to make this applic if a permit for work described in the applica areas covered by such permit at any reason SIGNATURE OF APPLICANT	cation as his authorized agent and I agree to ation is issued, I certify that the code official	conform to all applicable less authorized representative	aws of this jurisdiction. In additions shall have the authority to enter a sermit	n, Denied Date:	
SIGNALURE OF AFFLICAN I	ADDRESS:	DAIE:	FRUNE:	PERMIT ISSUED WITH REQUIREMENTS	
DESPONSIBLE DEDCOM IN OUT DESCRIPTION	TWODY TITLE		DIJONE		
RESPONSIBLE PERSON IN CHARGE OF	WURK, IIILE		PHONE:	CEO DISTRICT	
Wh	nite–Permit Desk Green–Assessor's C	anary-D.P.W. Pink-Publ	ic File Ivory Card-Inspector		