

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: 000992			
Owner Address:		Lessee/Buyer's Name:		Phone:		BusinessName:			
Contractor Name:		Address:		Phone:		Permit Issued: SEP 11 2000			
Past Use:		Proposed Use:		COST OF WORK: \$		PERMIT FEE: \$			
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature:		INSPECTION: Use Group: <i>4</i> Type: <i>50</i> <i>BOC 099</i> Signature: <i>[Signature]</i>			
Proposed Project Description:				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				Zone: CBL:	
				Action:		Approved <input type="checkbox"/>		Approved with Conditions: <input type="checkbox"/>	
Permit Taken By:				Date Applied For:				Zoning Approval:	
				Signature: _____ Date: _____				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"/>	

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..

closed & scanned

#4

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

PERMIT ISSUED WITH REQUIREMENTS

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

Action:

Approved
 Approved with Conditions
 Denied

Date: _____

PERMIT ISSUED WITH REQUIREMENTS

CEO DISTRICT