

Jeff Levine, AICP, Director Director of Planning and Urban Development Tammy Munson Director, Inspections Division

## **Electronic Signature and Fee Payment Confirmation**

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a *legal signature* per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are *paid in full* to the Inspections Office, City of Portland Maine by method noted below:

Within 24-48 hours, once my complete permit application and corresponding paperwork has been electronically delivered, I intend to **call the Inspections Office** at 207-874-8703 and speak to an administrative representative and provide a credit/debit card over the phone.

Within 24-48 hours, once my permit application and corresponding paperwork has been electronically delivered, I intend to **hand deliver** a payment method to the Inspections Office, Room 315, Portland City Hall.

I intend to deliver a payment method through the U.S. Postal Service mail once my permit paperwork has been electronically delivered.

Applicant Signature:

Date:

I have provided digital copies and sent them on:

Date:

NOTE: All electronic paperwork must be delivered to <u>buildinginspections@portlandmaine.gov</u> or by physical means ie; a thumb drive or CD to the office.



## Tent/Canopy or Temporary Event Staging Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Date of Set up/Event		Date of Breakdown/ End of Event	
<b>Tax Assessor's Chart, Block &amp; Lot</b> Chart# Block# Lot#	Property Ow	ner:	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant In Name: Address:	fo:	Fee: \$30.00
	Phone:	E-Mail:	
proposed and existing	info). porary event stagir g, parking and exis roduct information 56-8275). rtificate of Insuran	ng locations, including dime ting building locations. If n. (Applicant may call Parl ace listing the City as additi	ensions, exits and entrances of this is temporary staging, you ks & Recreation for maps of onal insured. Minimum amount
	Tel·		
Address:	101.		E-Mail:

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of Applicant:

Date:

This is not a permit; you may not commence ANY work until the permit is issued.