## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: Owner: St. Jose 1133 Washington Avenue		phs Manor Phone		797–0600	Permit No:
Owner Address: Same	Lessee/Buyer's Name:	Phone:	Business St. J	Name: oseph's Manor	081
Contractor Name: The Signery	Address: 299 Forest Avenue	Address: Phone: 879-7700			PERMIT ISSUED
Past Use:	Proposed Use:	COST OF WOR \$ 2,110.00	K:	PERMIT FEE: \$ 29.59	OCT 9
Health Care Facility	Health Care Facility		Denied	INSPECTION: Use Group: Type:	<b>DAY GE</b> : 408-D-005
Proposed Project Description:	<del></del>	Signature: PEDESTRIAN A		Signature: S DISTRICT (P.A.D.)	Zoning Approval:
Replace existing	Action:	Approved	vith Conditions:	Special Zone or Reviews:  Shoreland Wetland Flood Zone	
D. W. Tallara Barra	Data Analist Fam	Signature:		Date:	☐ Subdivision ☐ Subdivision ☐ Subdivision ☐ Subdivision ☐ ☐ Subdivision ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Permit Taken By: M.N.	Date Applied For: 10	<b>-</b> 7 <b>-</b> 98			Lone Flat maj Elima
2. Building permits do not include plumbin	tarted within six (6) months of the date of is			PERMIT ISSUED REQUIREMENTS	☐ Miscellaneous of Not ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied  Historic Preservation ☐ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review
				•	Action:
I hereby certify that I am the owner of record authorized by the owner to make this applicatif a permit for work described in the application areas covered by such permit at any reasonable.	tion as his authorized agent and I agree to c on is issued, I certify that the code official's	onform to all applicabl authorized representat	le laws of thi tive shall hav	s jurisdiction. In addition	☐ Appoved ☐ Approved with Conditions ☐ Denied
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	-
RESPONSIBLE PERSON IN CHARGE OF V		D DW DV 2		PHONE:	CEO DISTRICT
Whit	e–Permit Desk Green–Assessor's Car	nary-D.P.W. Pink-Pu	ublic File I	vory Card-Inspector	<b>L</b>