## 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: 761-2503 500 Woodfords St. Portland 04103 BJFL, LLC 391140 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 502 Woodfords St. 04103 Caravan Beads Permit Issued: Address: Phone: Contractor Name: 04106 874-2963 \*Benchmark Attn.Dave O'Connel \*650 Main St. So. Portland **A** 1999 COST OF WORK: PERMIT FEE: Proposed Use: Past Use: \$2,000.00 **\$** 36.00 Retail/ Mail Order Retail FIRE DEPT. Approved INSPECTION: Use Group: 13 Type: 319 ☐ Denied BOCAGE **CBL**: 184-D-015 Zone: B-Signature: Signature: He Zoning Approval Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PALD.) Approved Amend Permit # 990516 Action: Approved with Conditions: Stairs to exit at Fire Door at rear of Building □ Shoreland Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: Date Applied For: GD ☐ Site Plan mai Permit Taken By: September 21,1999 UB Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. □ Interpretation □ Approved tion may invalidate a building permit and stop all work... □ Denied **Mistoric Preservation** 如 ot in District or Landmark PERMIT ISSUED □ Does Not Require Review WITH REQUIREMENTS ☐ Requires Review Action: CERTIFICATION ☐ Appoved 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 ☐ Approved with Conditions □ 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 September 21,1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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**CEO DISTRICT**