City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: Phone: 773-8105 Location of Construction: Permit No: Business Name Owner Address Lessee/Buyer's Name Phone: Permit Issued: Contractor Name: Address: Phone: COST OF WORK: Proposed Use: PERMIT FEE: Past Use: JUN 2 6 2000 FIRE DEPT. Approved INSPECTION: Use Group #3.3Type 53 CTY OF □ Denied BOC 499 Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P Action: Approved П Special Zone or Reviews: Approved with Conditions: ☐ Shoreland 12 m 14 mars \Box Denied □ Wetland □ Flood Zone ☐ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: Jaka Danish 5.40 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation 自然者,只见于我们的人,并有关的,我们就是有关。" 人名英格兰人姓氏克兰人名 □ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review PERMIT ISSUED WITH REQUIREMENTS Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit SIGNATURE OF APPLICANT ADDRESS: PHONE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE