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: Yellowbird Rd **HLJ** Associates 772-0943 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Permit Issued: Contractor Name: Address: Phone: Benchmark 650 Main St 874-2963 COST OF WORK: **APR 1 0 1998** PERMIT FEE: Past Use: Proposed Use: **\$** 1,820 **XXXX**Xxcommercial 360,000 vacant FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: 5-2 Type: CBL: BOCA 96 Signature: Zening Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (Action: Approved 3000 sq. ft. air cargo apron Approved with Conditions: □ Shoreland Mith 30 × 100' Denied □Wetland STorage Office ☐ Flood Zone Signature: □ Subdivision Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: April 3, 1998 Sherry Pinard Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ 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-☐ Interpretation □ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation call for p/u 874-2963 (mark woodward) ☑ Not in District or Landmark □ Does Not Require Review ☐ Requires Review Action: > CERTIFICATION DAppoved 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 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, □ Denied 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 ADDRESS: SIGNATURE OF APPLICANT DATE: PHONE: Mark Woodward RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector