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

Location of Construction:	Owner:		hone:	Permit No: 9 8 1 0 0 7
Sewall St (Thompson's Poi Owner Address:	Int) Thompson's Lessee/Buyer's Name:	Phone: BusinessName:		
Owner Address.	Lessee/Buyer straine.	Thone.	usinessivame.	PERMIT ISSUED
Contractor Name:	Address:	Phone:		Permit Issued:
Deliverance Center	1008 Congress St Pt1	d, ME 04102	774-8192	_    SEP - 9 1998
Past Use:	Proposed Use:	COST OF WORK:	PERMIT FEE:	
		\$	\$ 35.00	OITY OF DODTI AND
		FIRE DEPT. App.		CITY OF PORTLAND
	ĺ	☐ Deni	ed Use Group: Type:	7
		Signature:	Signature. 7	Zone: CBL: 201-A-005
Proposed Project Description:		PEDESTRIAN ACTI		Zoning Approval:
		Action: Approved Approved with Conditions:		Special Zone or Reviews:
				☐ Shoreland
Extend time for erection of	Deni	ed 🗆		
			_	☐ Flood Zone
		Signature:	Date:	☐ Subdivision☐ Site Plan maj ☐minor ☐mm ☐
Permit Taken By:	Date Applied For:	01 September 1998		
31		Of September 1998		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
2. Building permits do not include plumbing, septic or electrical work.				☐ Miscellaneous ☐ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				☐ Interpretation
tion may invalidate a building permit and stop all work				□Approved
<i>3</i> 1	1			☐ Denied
				Historia Dansar atian
				Historic Preservation  ☐ Not in District or Landmark
				Dooes Not Require Review
				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 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				Approved with conditions
				Date:
areas covered by such permit at any reason	able hour to enforce the provisions of the	code(s) applicable to such perr	nit	bate.
		02 September 199		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE  PHONE:				CEO DISTRICT 2
	the Description of the second	2	File Law Co. 11	11
Wh	ite-Permit Desk Green-Assessor's (	Janary-D.P.W. Pink-Public	rile Ivory Card-Inspector	KCITK —
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