Cit	y of Portland, Maine - Build	ding or Use Pe		Permit No:	Issue D	Issue Date:				
389	Congress Street, 04101 Tel: (207) 874-8703,	Fax: (2	207) 874-8716	5	04-0432	2		208 A00	1002
Location of Construction: Owner Name:				1		Owner Address:			Phone:	
1001 Westbrook St Delta Air Lines				s Inc		Po Box 45852				
Business Name: Contractor Nam					Co	Contractor Address:			Phone	
Marsh Con		Marsh Constru	ruction Services, Inc		1	10 Wisteria Lane Rochester				
Lessee/Buyer's Name Phone:			t Fit-up retail shops		Pe	ermit Type:			1	
									CEO District:	
									3	
					-			INSPE	ECTION:	
							Approve		Group:	Type
							Denied		1	JT.
Pro	posed Project Description:									
	Port/ Tenant Fit-up retail shops				Si	Signature: Signature:				
	Total Totalio Tit up Totali Silops					PEDESTRIAN ACTIVITIES DISTRIC				
						Ш	A	pproved	w/Condition	
	Date A	Applied For:			- 1					
1.	This permit application does not preclude the		Special Zone or Review		iews	s			Historic Pres	ervation
1.	Applicant(s) from meeting applicable State and					☐ Not in Distri		ict or Landn		
	Federal Rules.									
2.	Building permits do not include plumbing, septic								Does Not Re	equire Revie
_	or electrical work.		is not started							
3.	3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work									
								🖰		
						Approved w/Co			/C 1:4:	
									Approved w/Condition	
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				CERTIFICATI					_	
	reby certify that I am the owner o									
	ve been authorized by the owner to sdiction. In addition, if a permit for									
	l have the authority to enter all ar									
	uch permit.	in to force by se	Pon	at any roas	J-141	10 0111	and pro	. 151011 (	2000(b) up	F
	·									
	NAME OF A PROCESS									
SIGNATURE OF APPLICAN			ADDRESS				DA	ΓE	P	НО

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

<b>Location of Construction:</b>	Owner Name:	Owner Address:	Phone:
1001 Westbrook St	Delta Air Lines Inc	Po Box 45852	
Business Name:	Contractor Name:	Contractor Address:	Phone
	Marsh Construction Services, Inc	10 Wisteria Lane Rochester	
Lessee/Buyer's Name	Phone:	Permit Type:	
	tatus: Approved Review		
Dept: St	ver: Marge Schmuckal Approv	val Date: 04/20/2004	
NT 4			O1 4 T

Note: Ok to Issue: ✓ 05/04/2004 Dept: Building **Status:** Approved with Conditions Reviewer: Mike Nugent **Approval Date:** Ok to Issue: ✓ Note: 04/21/2004 Dept: Fire Status: Approved Reviewer: Lt. MacDougal **Approval Date:** Ok to Issue: Note:

**Comments:** 

04/27/2004-mjn: need Certification forms completed faxed to Phil Marsh this date

## **CERTIFICATION**

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 areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK. TIT	DATE	PHO	