	y <b>of Portland, Main</b> Congress Street, 0410		_				06-1278	Issue Dat	e:	208 A00	01002	
Location of Construction: Owner Name:						Owner Address:				Phone:	Phone:	
100	01 Westbrook St		Delta Air Lines Inc			Po Box 45852						
Bus	iness Name:		Contractor Name:			Contractor Address:				Phone		
			Great Falls Builders, Inc./Aaron Bour			20 Mechanic Street Gorham				2078922744		
Less	see/Buyer's Name		Phone:			Permit Type: Alterations - Commercial					Zone:	
Past Use: Proposed Use:						Permit Fee:		Cost of Wo	ost of Work: CE		1	
Co	mmercial/Portland Jet Po	ort		ort/ install vestibules age		\$670.00		\$65,0	00.00	0.00 3		
			in parking gara			FIRE DEPT:		Approved	INSPECTION:			
								Denied	Use Gro	oup:	Type	
D.	· · · · I D · · · · · I D · · · · · · ·											
_	posed Project Description		narking garage			G:turn			G:	Signature:		
Portland Jet Port/ install vestibules in parking garage							Signature:  PEDESTRIAN ACTIVITIES DISTRIBUTED PROPERTY PR			<u> </u>		
						A	ction Approx	/ed Ap	orovea w/	Condition	Denied	
						Sig	gnature:			Date:		
	mit Taken By:		pplied For:			Zoning Approval						
ldobson 08/30/2			0/2006									
1.	This permit application	•	Spec	Special Zone or Review		ws Zoning Appeal			Historic Preservation			
Applicant(s) from meeting application Federal Rules.			eable State and	Shoreland		☐ Variance	☐ Variance		Not in District or Landn			
2.	Building permits do not include plumbing, septic or electrical work.			Wetland		Miscella	Miscellaneous		☐ Does Not Require Revie			
3. Building permits are void if work is not star within six (6) months of the date of issuance				☐ Flood Zon			Conditional Us			Requires Review		
	False information may permit and stop all wor	a building	Subdivision			☐ Interpretatio			Approved			
				Site Plan			Approved			Approved w/Condition		
				Maj 🔲 Mino 🔲 MM			☐ Denied			☐ Denied		
				Date:			Date:			Date:		
I ha juris shal	ereby certify that I am the tive been authorized by the sdiction. In addition, if a Il have the authority to e uch permit.	ne owner to a permit fo	o make this appli r work described	med proication a	as his authorized application is iss	ie p l ag	gent and I agree t d, I certify that th	o conform	to all app cial's aut	plicable laws of horized repres	of this sentative	
SIGNATURE OF APPLICAN				ADDRESS		5	DATE		РНО			

Location of Construction:	Owner Name:		Owner Address:	Phone:		
1001 Westbrook St	Delta Air Lines Inc		Po Box 45852			
Business Name:	Contractor Name:		Contractor Address:	Phone		
	Great Falls Builders, I	nc./Aaron Bour	20 Mechanic Street Gorl	nam	207892274	4
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:
			Alterations - Commerci	al		
		_	<u> </u>		•	_
<b>Dept:</b> Zoning <b>Status:</b> A	Approved	Reviewer	: Marge Schmuckal	Approval Dat	te: 08/3	31/2006
Note:					Ok to Issue	: <b>✓</b>
<b>Dept:</b> Building <b>Status:</b> F	Pending	Reviewer	: Michael A. Collins	Approval Dat	te:	
<b>Note:</b> Received on 09/07/06 @ 9:08	8 AM. Review in progre	ess. Need signat	ure of professional engine	er Paul	Ok to Issue	: 🗆
Bradbury on all plans.						
<b>Dept:</b> Fire <b>Status:</b> F	Pending	Reviewer	: Cptn Greg Cass	Approval Dat	<b>te:</b> 09/0	07/2006
Note:					Ok to Issue	: <b>V</b>
1) OK to issue permit approved by C	Capt. Cass					
Comments:						
9/7/2006-mc: Need signature of Paul l	Bradbury on both/all sets	s of plans. Calle	d and left message for him	on 09/07/06 @	2:45 PM. M	C.
9/5/2006-Idobson: Contacted Great F	alls Faxed a check sheet	t for Fire to there	office to Ion Indicated t	hat they would r	eturn the	
completed sheet within a couple of da			office to som material	nat they would i	ctarir tire	
1	•					
		CERTIFICATIO	)N			
I hereby certify that I am the owner of	record of the named pr	operty, or that th	ne proposed work is author	rized by the ow	ner of record	d and that
I have been authorized by the owner to						
jurisdiction. In addition, if a permit fo						
shall have the authority to enter all are	eas covered by such per	mit at any reaso	nable hour to enforce the	provision of the	e code(s) app	plicable
to such permit.						
SIGNATURE OF APPLICAN		ADDDEG	3	DATE	יזת	10
SIGNATURE OF APPLICAN		ADDRES	)	DATE	PH	10

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT