City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 9 8 0 6 5 5 Location of Construction: Phone: National Society of Colonial Dames of America Waldo St BusinessName: Lessee/Buver's Name: State of Main Phone: Owner Address: Permit Issued Phone: Contractor Name: Address: JUN 2 2 1008 449 Forest Ave Portland, ME 04102 878-7700 The Signery COST OF WORK: Proposed Use: PERMIT FEE: Past Use: 28.80 CITY OF PORTLAN FIRE DEPT. □ Approved INSPECTION: Museum ☐ Denied Use Group: Type: **Zone** CBL: 213-D-002 Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Approved with Conditions: \Box □ Shoreland 5 Signs Denied П □Wetland □ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: SP 10 June X 1998 **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous 2. 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 3. ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation □ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review 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 11 June 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE:

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE