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

Location of Construction: 118 Johnson Rd	Owner: Transport L	easing	Phone:	Permit No:
Owner Address: 9 Johnson St B-7	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name: ** Randall Construction	Address: 3 Scabbard Rd Scarbor		883-5259	Permit (seved)
Past Use:	Proposed Use:	COST OF WORK	Y: PERMIT FEE: \$ 25.00	OCT 9 No. 1
XXXXXXXX Office	Same	FIRE DEPT. IZ		3 CITY OF PORTLAND
		Signature:	HM Signature: Alle	CBL: 214-A-A-007
Proposed Project Description: Relocate one door, and install	an additional one	PEDESTRIAN AC	CTIVITIES DISTRICT (#A.D.) Approved Approved with Conditions: Denied	Zoning Approval: Special Zone or Reviews: Shoreland Wetland
		Signature:	Date:	☐ Flood Zone ☐ Subdivision
Permit Taken By: UB	Date Applied For:	October 1, 1998		☐ Site Plan maj ☐minor ☐mm ☐ Zoning Appeal
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. Building permits do not include plumbing, septic or electrical work. 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. 				☐ Variance ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation
			WITH REQUIREMENTS	Historic Preservation ☑Not in District or Landmark □ Does Not Require Review □ Requires Review
				Action:
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 provisions of the code(s) applicable to such permit				on, ☐ Denied C
		O-t-h 2 1000		
SIGNATURE OF APPLICANT	ADDRESS:	October 2, 1998 DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE		PHONE:	CEO DISTRICT 2