## Location of Construction: Owner: Phone: Permit No 'N/A UNUM 2211 Congress St. Owner Address: Lessee/Buyer's Name: Phone: BusinessName: N/A N/A N/A SAme Phone: PERMIT ISSUED Contractor Name: Address: 772-2888 PO Box 1396 Portland, ME Allied/Cook Construction COST OF WORK: **PERMIT FEE:** Past Use: Proposed Use: JIN 1 9 2000 \$924.00 \$150,000.00 Office Office FIRE DEPT. Approved **INSPECTION:** Use Group: D Type: □ Denied EBL 715-B-002 Zone BOCA99 Atrin Signature: SOA Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (A.D.) Action: Approved Special Zone or Review Approved with Conditions: □ Shoreland Denied interior work □ Wetland □ Flood Zone Signature: Date: □ Subdivision Site Plan maj Eminor Emm Permit Taken By: Date Applied For: June 16, 2000 G G Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. 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 DNot in District or Landmark PERMITISSUED Does Not Require Review WITH REQUIREMENTS □ 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 □ Approved with Conditions 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 Date areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit June 16, 2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: PERMITISSUED WITH REQUIREMEN **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT**

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

White-Perm"