

Location of Construction: 2211 Congress Street		Owner: UNUM HO#1		Phone: 770-1860		Permit No: 961232 PERMIT ISSUED DEC 19 1996 CITY OF PORTLAND
Owner Address:		Leasee/Buyer's Name:		Phone:		
Contractor Name: Langford and Lowe Inc.		Address: 248 Warren Ave., Portland 04104		Phone: 797-5141		Zone: of CBL: Zoning Approval: Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
Past Use: Cafeteria		Proposed Use: Same w/inter reno		COST OF WORK: \$ 6,000.00		
Proposed Project Description: Interior renovation as per plans				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: [Signature] Signature: [Signature]		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____
Permit Taken By: Vicki Dover		Date Applied For: 12/11/96				

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
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..

Call Glen at Landford & Lowe for P/U

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 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

SIGNATURE OF APPLICANT: [Signature] ADDRESS: _____ DATE: 12/11/96 PHONE: _____
Glen Moon
Langford & Lowe

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

PERMIT ISSUED WITH REQUIREMENTS