## Permit Ng Location of Construction: Owner: c/o Dirigo Mgmt.CoPhone: 2367 Congress St. Portland, 04101 Strohm 1987 Trust/ (207) 871-1080Owner Address: Phone: Lessee/Buyer's Name: BusinessName: One City Center Portland 04101 Contractor Name: Address: Phone: \* BP.O. Box 661 Yarmouth, Me. 818-2550 |PERMIT FEE: \*Project Resources Inc. \* .<u>04096\*</u>(207) COST OF WORK: 1 2 1999 MAY Past Use: Proposed Use: \$ <u>11.700.00</u> \$ 80.00 Office Same FIRE DEPT. Approved **INSPECTION:** CITY OF PORT Use Group: " Type: 3 □ Denied Zone: CBL: MOCA96 238A-B-002 18 m > Signature: Signature: Zoning Approval: **Proposed Project Description:** PEDESTRIAN ACTIVITIES DISTRICT (P (mi Action: Approved Special Zone p Interior Renovations Approved with Conditions: □ Shoreland Denied □ Wetland □ Flood Zone Signature: Date: □ Subdivision Site Plan mai Ominor Omm Permit Taken By: Date Applied For: U.B. May 10th, 1999 Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance 1. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation tion may invalidate a building permit and stop all work.. □ Approved WITH REQUIREMENTS Denied 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 □ Approved with Conditions 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, Denied 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 May 11th, 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: 3 **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-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector