City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: 775-5677 Owner: Permit No: Arrow Realty 95 Hutchins Drive Lessee/Buyer's Name: Owner Address: Phone: BusinessName: 34 Diamond Street Portland FEDEX Permit Issued: Contractor Name: Address: Phone: P.O. Box 359 Fairfield ME The Sheridan Corp. COST OF WORK: PERMIT FEE: Past Use: Proposed Use: \$ 600<u>.00</u> \$ 96,000 FIRE DEPT. Approved INSPECTION: business same Use Group: 13 Type: 2 ☐ Denied CBL: Zone: BOCA99 240-B-002Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PAID.) Action: Approved □ Shoreland Dtat Approved with Conditions: raise roof of expisting service bay 4' Denied □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐mind Permit Taken By: Date Applied For: June 15 2000 K **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ 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 ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation ZINot in District or Landmark Does Not Require Review ☐ Requires Review PERMIT ISSUED WITH REQUIREMENTS 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 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 SIGNATURE OF APPLICANT ADDRESS: PHONE:

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

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE