Location of Construction:	Owner:	Pho	ne:	Permit No. 9 9 000 8
1032 Brighton Ave	Key Bank o	f Maine c/o Net Prop. I	nc. 874-7000	Permit No 9 9 0 0 0 8
Owner Address:	Lessee/Buyer's Name:		inessName:	FEET MET COMES
NET Properties 535 Boylston St	Boston MA 02116			1000000
Contractor Name: **The Pochebit Co. Inc.	Address: Phone: 171 Warren Ave Ptld 04103			Permit Issued:
Past Use:	Proposed Use:	COST OF WORK: \$ 13,800	PERMIT FEE: \$ 90	JAN 5 1999
Drive-up Atm	Same	FIRE DEPT.   Approv	ed INSPECTION:	
		☐ Denied	Use Group: Type:	Zone: CBL: 263A-A001
Proposed Project Description:		Signature:	Signature: Affect TIES DISTRICT (F.A.D.)	Zoning Approval
		PEDESTRIAN ACTIVITIES DISTRICT (J.A.D.) Action: Approved		DAMASED DYN FOCK
Reconstruct ATM Building		Approved with Conditions:		Special Zone or Reviews:
Reconstruct Aim Bullding		Denied		
				□ Wetland □ Flood Zone
		Signature:	Date:	□ Subdivision
Date Applied For:  Japuary 4, 1998 o			☐ Site Plan maj Ɗminor ☐mm ☐	
SP January 4, 199 <b>%</b> 9			Footpy Zoning Appelar	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□Variance
2. Building permits do not include plumbing, septic or electrical work.				☐ Miscellaneous
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				☐ Conditional Use
tion may invalidate a building permit and stop all work				☐ Interpretation ☐ Approved
tion may invariance a building permit a	na stop un work			□ Denied
		Pr	n.	Historic Preservation
WITH REQUIREMENTS				Not in District or Landmark
				□Does Not Require Review
				☐ Requires Review
			-75	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 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,				n □ Approved with Conditions
if a permit for work described in the applica			l have the authority to enter al	Date:
areas covered by such permit at any reasona	able hour to enforce the provisions of the	e code(s) applicable to such permit		Date.
	, panaa	January 4, 1999	DVVO VIO	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
				3
RESPONSIBLE PERSON IN CHARGE OF	WORK, TITLE		PHONE:	CEO DISTRICT MW/TR
Wh	ite-Permit Desk Green-Assessor's	Canary-D.P.W. Pink-Public Fi	e Ivory Card-Inspector	