					PERMIT ISSI	JED	
	y of Portland, Maine Congress Street, 04101	•		t Application [	01-0576UN Issue Date		
l	ntion of Construction:	Owner Name:			Owner Address: PODTI AND Phone:		
	Riverside St		H J Associates Ltd		155 Riverside St. Portland, M. A. 207-774-5861		
Busi	ness Name:		Contractor Name:		Contractor Address: Phone		
n/a			Amerail Systems Inc.		2301A West 12th Street Erie 8144568221		
	ee/Buyer's Name		Phone:		nit Type:	Zone:	
n/a		n/a	n/a		ilding Miscellaneous	P -1	
J	Use:	Proposed Use:	Proposed Use:		mit Fee: Cost of Wor		
Co	mmercial / Hotel		Same: Replace Existing Balcony and Hand-Rails		\$276.00 \$42,0	00.00 3	
		and Hand-Rail			Approved  Denied	INSPECTION: Use Group: R-  Type: PERMIT ISSUED WEDGREGGIBZNENTS 1999	
Proposed Project Description:					, <	110	
Replace existing balcony and handrails					PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
				Actio	on: Approved Ap	proved w/Conditions Denied  Date:	
1		Date Applied For: 05/21/2001			Zoning Approval		
1	This permit application does not preclude the		Spe	ecial Zone or Reviews	Zoning Appeal	Historic Preservation	
1.	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Variance	Not in District or Landman	
2.	Building permits do not i septic or electrical work.	nclude plumbing,	Wetland		Miscellaneous	Does Not Require Review	
3. Building permits are void if within six (6) months of the False information may invapermit and stop all work		the date of issuance.	☐ Flood Zone ☐ Subdivision		Conditional Use	Requires Review	
					☐ Interpretation	Approved	
			☐ Si	te Plan	Approved	Approved w/Conditions	
			Maj Minor MM		☐ Denied	Denied ,	
Date				5/3/101	Date:	Date:	
PERMIT ISSUED WITH REQUIREMENTS							
I ha juris shal	ve been authorized by the osdiction. In addition, if a p	owner to make this apple ermit for work describe	med procession the	as his authorized age application is issued	nt and I agree to conform I, I certify that the code of	d by the owner of record and that to all applicable laws of this fficial's authorized representative rision of the code(s) applicable to	
SIGNATURE OF APPLICANT				ADDRESS		E PHONE	
RES	SPONSIBLE PERSON IN CHAR	GE OF WORK, TITLE		<del></del>	DATE	E PHONE	