City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 9 8 0 7 1 6 Location of Construction: Phone: Robert & Cheryl Farley 775-6578 104 Dorset St PERMIT ISSUED Lessee/Buyer's Name: Phone: Owner Address: BusinessName: SAA 04102 Permit Issued: Contractor Name: Address: Phone: JUI - 2 1998 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: 25.00 CITY OF PORTL FIRE DEPT. □ Approved INSPECTION: 1-fam Use Group: 9 3 Type: 5 3 □ Denied CBL: Zone: Signature: 🛪 Signature: Zening Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.M.D.) Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland Change Use/Home Occupation CRYCELAS COLORS Date Applied For: Denied \Box ☐ Wetland ✓ K ☐ Flood Zone ☐ Subdivision _ < Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: SP 29 June 1998 **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. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation 3. □ Approved tion may invalidate a building permit and stop all work.. ☐ Denied WITH REQUIREMENTS **Historic Preservation** □ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review 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 ☐ Denied 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 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 29 June 1998 DATE: SIGNATURE OF APPLICANT ADDRESS: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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