City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: <u>ue 1, 18.</u> in 10**1**2 in 1 Fibrar Angle Acre 47343; 33 Lessee/Buver's Name: Owner Address: Phone: BusinessName: Phone: Contractor Name: Address: 1700 And 1353, ent aparthoroughs, the that to かく軽にいった でいい しょしも こくじゅうきか COST OF WORK: PERMIT FEE: Past Use: Proposed Use: FFB - 7 2001 **FIRE DEPT.** □ Approved INSPECTION: To monerous I for editors that correspond / red to in care □ Denied Use Group: Type: Zone: CBL: of I to be the state of the state of Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Special Zone or Reviews: Approved with Conditions: The . . I'M WAS " EXISTANTED SO ☐ Shoreland Denied □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 100 Se 医生物性坏疽 医格尔二氏腺素 多数 **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 ☐ Approved tion may invalidate a building permit and stop all work... □ Denied **Historic Preservation** ☐ Not in District or Landmark ☐ Does Not Require Review □ Requires Review PERMIT ISSUED Action: WITH REQUIREMEN **CERTIFICATION** ☐ Appoved ☐ Approved with Conditions 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 □ 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 SIGNATURE OF APPLICANT ADDRESS: PHONE: PERMIT ISSUED WITH REQUIREMENT 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

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