DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK **CITY OF PORTLAND**

Please Read

Application And						
Notes, If Any, Attached		PE	RMP	Permit Number: 030935		
This is to certify that	Forest Ave Profession	nal Bld				
has permission to	Moving interior non-	load being walls.	cw floor and	suspended ceiling.		
AT 1250 Forest Ave			292 E001001			
of the provision	ne person or persons of the Statutes on, maintenance and the state of	of Name and	or the Or Lunces	ng this permit shall comply with all softhe City of Portland regulating es, and of the application on file in		
	orks for street line re of work requires	N lication ginand with the third or control of the thi	insper n must n permis n procu ding or t therec sed-in.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.		
OTHER REQU	IBED APPROVALS					
Health Dept.						
Appeal Board	· · · · · · · · · · · · · · · · · · ·			A dela		
Other	rtment Name			Director - Building & Inschapelon Services		
		ENALTY FOR F	REMOVING THIS CA			

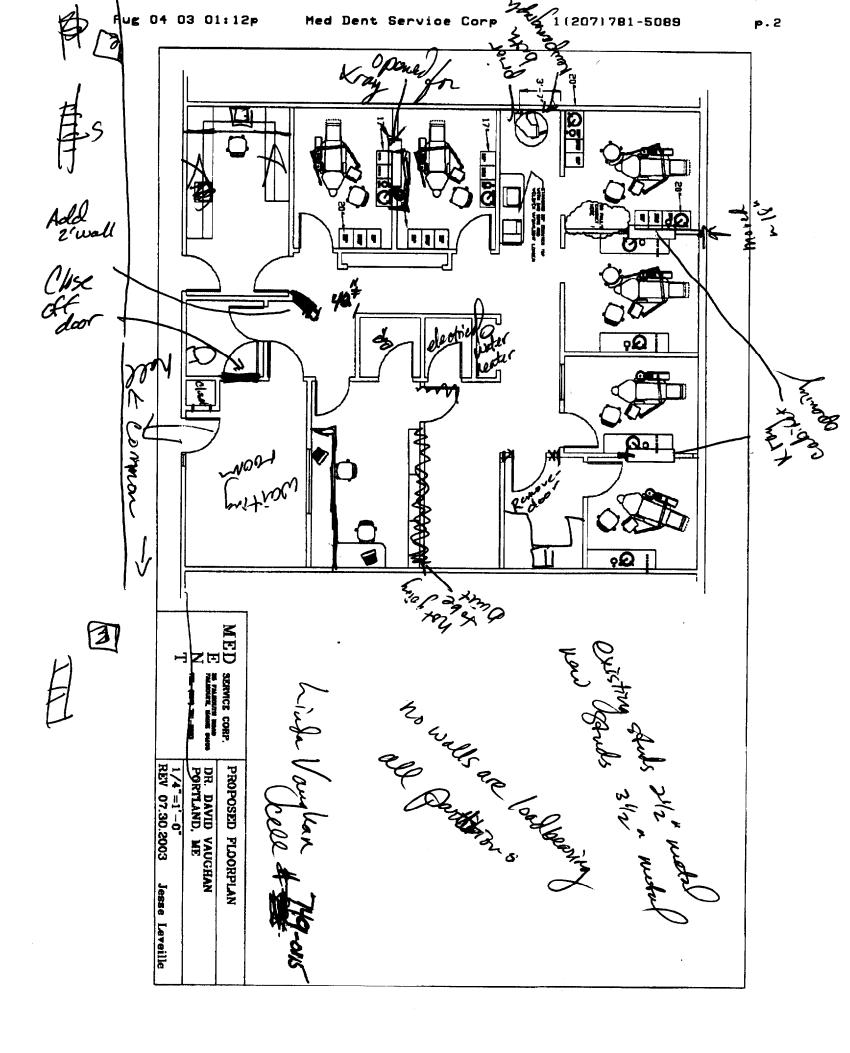
Phone: 207-878-1925 Phone Zone: CEO District: 1 PECTION: Croup: Type: Type: Type: Type: Date: Historic Preservation
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Date:
Historic Preservation
Historic Preservation
Not in District or Landma
Does Not Require Review
Requires Review
Approved
Approved w/Conditions
☐ Denied
Date:
D

All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

	- (11 0 10	11 9 4 1
Location/Address of Construction: /2				re. Unit 20f
Total Square Footage of Proposed Struc	ture	Square Footo	ige of Lot	
Tax Assessor's Chart, Block & Lot Chart# 2 Block# [Lot# 00	Owner: David +	Linda Van	ghan	Telephone: 878-1925
Lessee/Buyer's Name (if Applicable)	telephone:	name, address Linda Ka Farm Rd K. Me O	ughan	Cost Of 15,600 Work: \$ 15,600
Current use: Medical office of the location is currently vacant, what w	•	Dental	office	
Approximately how long has it been vac Proposed use: (ental office Project description: moving interior + Suspended restures Contractor's name, addressed telephone	norloadh	egring wa Vaughan	ells, new	sinks, new flooring
Westerrof, Mc Who should we contact when the permit Mailing address: Same	* 18 – 192 t is ready:S	s of		- - -
Ve will contact you by phone when the paylew the requirements before starting a and a \$100.00 fee if any work starts before	iny work, with	a Pian Reviewe	PHONE: 8	
THE REQUIRED INFORMATION IS NOT INCL ENIED AT THE DISCRETION OF THE BUILDING FORMATION IN ORDER TO APROVE THIS PI	3/PLANNING D			
ereby certify that I am the Owner of record of the nove been authorized by the owner to make this appoint to a addition, if a permit for work described in the latter the authority to enter all are a covered by this permit.	ilication as his/her in this application i	authorized agent. Is issued, I certify th	i agree to conf at the Code Off	form to all applicable laws of this Ticial's authorized representative
Ignature of applicants	F. Val	1 0	ate: 8	5/02
This is NOT a permit, you may no	ot commen	ce ANY work	c until the p	permit is issued.

Planning Department on the 4th floor of City Hall



MED SERVICE CORP.

E 25 Felmouth Road Felmouth, ME 04105 N Tel: (207) 781-2293 (800) 439-2293 Fex: (207) 781-5089

FACSIMILE TRANSMITTAL SHEET							
m Mike Nuggent	Linda U	aughan					
COMPANY:	DATE 8/4/03						
PAX NUMBER:	TOTAL NO. OF PAGES INCLUDEN	G COVER:					
	a						
PACNE NUMBER:	SENDER'S REFERENCE NUMBER						
RB:	YOUR REPIRENCE NUMBER:						
☐ URGENT ☐ FOR REVIEW ☐ PLEASE CO	MOMENT	Please recycle					
NOTES/COMMENTS:							
Office Plan for D at 1250 Forest A	buid Vaugho	in					
at 1250 Forest A	ve, Portlan	el.					