City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:	Owner:	<u>-</u>	Phone:	Permit No:
68 Bishop Street 04103	*** William Boyle		878-7890	
Owner Address: &70 Bishop Street	Lessee/Buyer's Name:	Phone:	BusinessName:	000034
Contractor Name:	Address:	Phone	:: ::	Permit Issued:
Past Use:	Proposed Use:	COST OF WOR	K: PERMIT FEE: \$ 324.00	: 14
Warehouse	same shows offer rent	FIRE DEPT. D	Approved INSPECTION: Denied Use Group 52 Type Oct 496 1 11	Zone: CBL:
Proposed Project Description:	125eACK DECCA	. I Digitature.	CTIVITIES DISTRICT (PA.D.	Zoning Approval:
Interior renovations Assumed Street Performance: Approved with Conditions:			Shoreland Wetland Subdivision	
Permit Taken By: K.	Date Applied For: x Ja	an 3 2000 K		☐ Site Plan maj ☐minor ☐mm ☐
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. Building permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work 				Zoning Appeal □ Variance □ Miscellaneous □ Conditional Use □ Interpretation □ Approved □ Denied
			PERMIT ISSUED WITH REQUIREMENTS	Mistoric Preservation DNot in District or Landmark □ Does Not Require Review □ Requires Review
				Action:
CERTIFICATION 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, 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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit				tion, Denied
	Jan 3 2	2000		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE (OF WORK, TITLE		PHONE:	PERMIT ISSUED 1
,	White-Permit Desk Green-Assessor's Ca	nary-D.P.W. Pink-Pu	blic File Ivory Card-Inspector	, THE NEQUIREMENTS