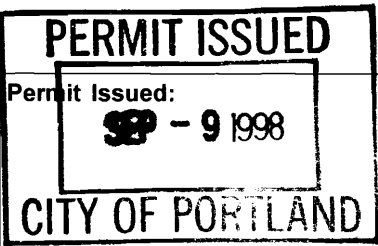


Location of Construction: 557 Riverside St		Owner: Riverside Welders, LLC		Phone: 797-5832		Permit No: 981009	
Owner Address: SAA 04103		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Phoenix Welding		Address: 557 Riverside St Ptld, ME 04103		Phone: 797-5832		Permit Issued: SEP - 9 1998	
Past Use: Commercial		Proposed Use: Same w/fabrication shop		COST OF WORK: \$ 27,028.00		PERMIT FEE: \$ 155.00	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: F2 Type 2C	
Proposed Project Description: Construct Fabrication Shop (60 x 120)				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
Permit Taken By: UB		Date Applied For: 31 August 1998		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: CBL: 306-B-007	
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		Zoning Approval: <i>[Signature]</i> 9/4/98	
				Signature: _____ Date: _____		Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>N/A</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>N/A Zone C</i> <input type="checkbox"/> Subdivision <input checked="" type="checkbox"/> Site Plan major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	



PERMIT ISSUED WITH REQUIREMENTS

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

02 September 1998

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

- Zoning Appeal**
- Variance
 - Miscellaneous
 - Conditional Use
 - Interpretation
 - Approved
 - Denied

- Historic Preservation**
- Not in District or Landmark
 - Does Not Require Review
 - Requires Review

- Action:**
- Approved
 - Approved with Conditions
 - Denied

Date: *[Signature]*

CEO DISTRICT *AR/DC* 1