City of Portland, Maine - Building	g or Use Permit Applica	tion 389 Congress	Street, 04101, Tel: (2	.07) 874-8703, FAX: 874-8716	
Location of Construction: 655 Riverside St	Owner: Porter Dr	ywall	Phone: 878-2024	Permit No: 9 8 1 0 9 4	
Owner Address: 89 Auburn St STE 1004 Ptld, 1	Lessee/Buyer's Name: Œ 04103	Phone:	BusinessName:	PERMIT ISSUED	
ontractor Name: Address: Porter Drywall			2:	Permit Issued:	
Past Use:	Proposed Use:	COST OF WORK \$ 36,000.0		ALTY OF POSSIBLE	
Vacant Building	Private Pharmacy Non-Retail		Approved INSPECTION: Use Group: B T BOCH961	ype:53 Zone: CBL: 311-A-006	
Proposed Project Description: Change Use - Make Interior Rend	Action:	Signature:	A PACE		
Permit Taken By: MG	Date Applied For:	10 Sept 98		Site Plan maj piminor □mm□ Site Plan maj piminor □mm□ Zoning Appeal	
 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 				☐ Variance ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied	
			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				addition, Denied	
SIGNATURE OF APPLICANT	ADDRESS:	11 Sept 98 DATE:	PHONE:		
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE ermit Desk Green–Assessor's	Canary–D.P.W. Pink–Pu	PHONE:	ctor CEO DISTRICT	