## City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Owner: HOME DEPOT Location of Construction: Phone: 732-926-369? 245 RIVERSIDE STREET Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Permit Issued: Contractor Name: Address: Phone: \*\*\* J.J. VACCARO INC 38 UNION SQ. SOMERVILLE MASS 02143\*\*\*\*\* COST OF WORK: 000 PERMIT FEE: Proposed Use: Past Use: § 1,638.00 \$269,000 SAME RETAIL FIRE DEPT. Approved INSPECTION: Use Group: B Type: 20 ☐ Denied **CBL**: 315-B-001 Zone: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved XXXXXX TOOL RENTAL ADDITION Approved with Conditions: ☐ Shoreland ∧ Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: Date Applied For: DEC 14 2000 MiSite Plan maj Niminor Minor Permit Taken By: K 72000000 Zoning Appea □ 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. 2. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. □ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation Not in District or Landmark PERMIT ISSUED WITH REQUIREMENTS ☐ Does Not Require Review ☐ Requires Review Action: **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 DEC 15 2000 K DATE: PHONE: SIGNATURE OF APPLICANT ADDRESS: PHONE: 3 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE CEO DISTRICT White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector