City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Permit No: Y 8 () Owner: Phone: 739 Warren Ave Warren Avenue Corporation Owner Address: Lessee/Buyer's Name: Phone: BusinessName: Career Training Institute Permit Issued: Phone: Address: Contractor Name: 1567 Hammond St Bangor, ME 04401 1-800-639-7103 Bangor Neon, Inc. **FER 2 4 1998 COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: 33.80 CITY OF PORTLAND **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: Type: 316-A-0,05 Signature: Zoning Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (A.D.) Action: Approved Approved with Conditions: □ Shoreland ₩ ŭ Erect Signage 44 Sq Ft Denied ☐ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 23 February 1998 Mary Gresik **Zoning Appeal** □ 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 Does Not Require Review ☐ Requires Review Action: CERTIFICATION ☐ Appoved 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 ☐ Approved with Conditions ☐ 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 23 February 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: Via Fax RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: CEO DISTRIC

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