

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

Location of Construction: 730 Warren Ave. 04103		Owner: Ströhm 1989 Trust/Dirigo Mgmt.		Phone: 871-1080		Permit No: 991167	
Owner Address: C/O Dirigo Mgmt. 1 City Center		Lessee/Buyer's Name: Broadcast Music, COX		Phone:		Business Name:	
Contractor Name: Atlantic Coast Contractors		Address: P.O. Box 10793 041-4		Phone:		Permit Issued: OCT 26 1999	
Past Use: Office		Proposed Use: Same		COST OF WORK: \$45,000.000		PERMIT FEE: \$294.00	
Proposed Project Description: Interior Renovations				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
Permit Taken By: <i>NW</i>				Date Applied For: <i>GD</i> October 19, 1999			

CITY OF PORTLAND

Zone: CBL: 316-2-005

Zoning Approval: *[Signature]*

Special Zone or Reviews:

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

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: _____

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

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: *October 19, 1999* PHONE: _____

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

PERMIT ISSUED WITH REQUIREMENTS
CEO DISTRICT **1**