

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

Location of Construction: 739 Warren Ave. 04103		Owner: Strohm 1989 Trust/Dirigo Mgmt.		Phone: 871-1080		Permit No: 9911-7	
Owner Address: C/O Dirigo Mgmt. 1 City Center		Lessee/Buyer's Name: Broadcast Music. COM		Phone:		BusinessName:	
Contractor Name: Atlantic Coast Contractors		Address: P.O. Box 10793)41-4		Phone:		Permit Issued: 26	
Past Use: Office		Proposed Use: Same		COST OF WORK: \$45,000.00		PERMIT FEE: \$294.00	
Proposed Project Description: Interior Renovations				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: B Type: 5B	
				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: B-4 CBL: 316-A-005	
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		Zoning Approval: 26/007/1999	
Permit Taken By: NW				Date Applied For: GD October 19, 1999			

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

**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: _____

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: _____

**PERMIT ISSUED
WITH REQUIREMENTS
CEO DISTRICT**

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