

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 2014-02166	Issue Date:	CBL: 321 A004003
---------------------------------	--------------------	----------------------------

Location of Construction: 470 RIVERSIDE ST - UNIT #3	Owner Name: ALEXANDER-RUSSELL COMPANY LLC	Owner Address: 10 BATTLES HILL LN SCITUATE, MA 02066	Phone:
--	--	---	---------------

Business Name:

Lessee/Buyer's Name	Phone:	Permit Type: Change of Use - Commercial	Zone: IM RPZ
----------------------------	---------------	---	------------------------

Past Use: Vacant Warehouse and Office Space - Sani-Clean Distribution	Proposed Use: Office Space, Warehousing, Production - All natural bio- pesticide production.	Permit Fee: \$125.00	Cost of Work: \$1,000.00	CEO District: 8
--	--	--------------------------------	------------------------------------	---------------------------

Proposed Project Description:
No Construction, Use will be Office Space, Warehousing, Production of
All Natural Bio-pesticide Production in Unit #3

INSPECTION:

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 09/17/2014	Zoning Approval	
------------------------------------	--	------------------------	--

<ol style="list-style-type: none"> 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.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: _____	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
---	---	---	---

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE