						PER	MIT	ISS	UED		
City of Portland, Maine	- Ruilding or Use	Permi	t Application	Pe	rmit No:	Issue Dat	e:		CBL:		
389 Congress Street, 04101					01-0451	M	IAY I	0 2	10 32d I	3010001	
Location of Construction:	Owner Name:				r Address:				Phone	:	
100 Industrial Way	Milliken Alfre	Milliken Alfred H Jr			Industrial W	y (PottYn) Fre P(3R	LAN	D	
Business Name:	Contractor Name	Contractor Name:			Contractor Address: Phone						
Allgash Brewing Company	no contractor/s	no contractor/self			n/a n/a						
Lessee/Buyer's Name	Phone:				Permit Type:					Zone: M	
same	207-797-6174	207-797-6174			Alterations - Commercial					<u>' کا '</u>	
Past Use:	Proposed Use:			Permit Fee: Cost of Work:				CEC	:]		
office space	storage space				\$60.00	\$7	50.00		11		
				LE Approved				SPECTION:			
							Use G	Use Group: B Type: 2C			
				R				MERNETENS SUED OF			
Proposed Project Description:					WITH REQUIREMENTS						
CHANGE OF USE interior removal of walls into war			space	Signature: Will Signature							
			•		PEDESTRIAN ACTIVITIES DISTRIC						
					Action: Approved Approved w				w/Conditions Denied		
					Signature:						
Permit Taken By: jodinea		Zoning Approval									
jodinea 05/01/2001 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Review		ws Zoning Appeal				Historic Preservation			
		Shoreland			☐ Variance			Not in District or Landman			
2. Building permits do not include plumbing, septic or electrical work.			☐ Wetland		☐ Miscellaneous			☐ Does Not Require Review			
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			ood Zone		Conditional Use			Requires Review			
			bdivision	☐ Interpretation ☐ Approved ☐ Denied				☐ Approved w/Conditions ☐ Denied			
			e Plan								
			Minor MN								
			V 5 00	6\	Date:			Date:			
			ι,	'							
		•		NAT.			RMIT		UED EMENT	9	
I hereby certify that I am the o	umar of record of the mo		ERTIFICATION OF ALL ALL		1 1		-				
I hereby certify that I am the of I have been authorized by the of jurisdiction. In addition, if a p shall have the authority to enter such permit.	owner to make this appli ermit for work described	cation a	s his authorized application is is	agent	t and I agree I certify that	to conform the code of	to all a	pplic autho	able law	s of this presentative	
SIGNATURE OF COLUMN											
SIGNATURE OF APPLICANT			ADDRESS			DATE	3		PF	IONE	

Met on site. All work is now- LOAD BEARING. Two walls that were Removed were partitions only. Will RE-INSPORT at Final gr 5/23/01- Fenal inspection of non load kearing wall-all openings closed in - wall looks good-OK to close permet. Jan M Lol peint CBL# 326-B-1
point #01-0451