## Permit No: 9 81220 Location of Construction: Owner: Phone: XXXXXXXX Ross S. Byrl Enterprises 1917 Forest Ave 1-800-242-2505 PERMIT ISSUED Phone: **Owner Address:** Lessee/Buyer's Name: BusinessName: Christy's Market Pernit Issued: Phone: Contractor Name: Address: OCT 2 6 1998 603-492-1489 Mikri Construction Alton, NH 03809 P.O. Box 992 PERMIT FEE: **COST OF WORK:** Proposed Use: Past Use: \$ 14,000.00 \$ 90.00 **CITY OF PORTLAND** FIRE DEPT. Approved Convenience Store **INSPECTION:** Same Use Group: M Type: 3,3 □ Denied Zone CBL: BOCA96 327-A-A-006 Signature: Signature: X tre Zoninia Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) Action: Approved Special Zone or Reviews Approved with Conditions: □ Shoreland Make Interior Renovations Denied □ Wetland □ Flood Zone □ Subdivision Signature: Date: □ Site Plan maj □minor □mm □ Permit Taken By: Date Applied For: MG 20 October 1998 Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. Conditional Use □ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Approved tion may invalidate a building permit and stop all work.. WITH REQUIREMENTS Denied Historic Preservation Not in District or Landmark Does Not Require Review □ Requires Review Action: CERTIFICATION Approved with Conditions 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 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 21 October 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: CEO DISTRICT White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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