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

Location of Construction:	Owner:		Phone:	Permit No: 9 8 () 4 5 4
74 Evergreen Dr	Elichaa, Joseph	& Suzan	Thome.	Permit No. 9 6 0 4 5 4
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
	Maine resources			
Contractor Name:	Address:	Phone		Permit Issued:
Keeley Construction Inc.	P.O. Box 1074 Ptld,	ME 04104	773-8499	<b>NW - 6 199</b> 8
Past Use:	Proposed Use:	COST OF WOR	1	EE:
		\$ 180,000.00	\$ 920.	00
Office/Commercial	_	FIRE DEPT.	Approved INSPECTI	ON: CITY OF PORTLAND
	Same	, i		0/S Type: 2C
			130CA9	Zone; CBL:
		Signature:	<b>グ</b> M Signature:	Holfsee 2-11 329-A-004
Proposed Project Description:		PEDESTRIAN A	CTIVITIES DISTRIC	T (P) (D.) Zoning Approval:
Action: Approved Approved with Conditions:				Special Zone or Reviews:
				ons:
Construct Addition 60 x 100  Denied			□ □ Wetland	
				☐ Flood Zone
		Signature:	Date:	□Subdivision
Permit Taken By: Mary Gresik	Date Applied For:	famala 1000		☐ Site Plan maj ¶Skninor ☐mm ☐
Mary Gresik	30 M	March 1998		Zoning Appeal
1. This parmit application does not proclude the Applicant(s) from meeting applicable State and Federal rules				□ Variance
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				☐ Miscellaneous
2. Building permits do not include plumbing, septic or electrical work.				☐ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				☐ Interpretation
tion may invalidate a building permit and stop all work				□Approved
				□Denied
				Historic Preservation
			Pcn	TAKE IN DISTRICT
			MTH REQUIR	Des Not Require Review
			THE REDITION	□ Requires Review
			*UIT	MENTA
				Action:
	CERTIFICATION			☐ Appoved
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			•	
areas covered by such permit at any reasonable ho				ty to enter all Date: 5/1/98
21		- (-) <b>F. F</b>	F	
<i>ikl.</i> ()				000
of arange	y-acces	30 March 199		
SIGNATURE OF APPLICANT Howard Getch	nell ADDRESS:	DATE:	PHONE:	101
	Routed .	7/27/18		
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE		PHONE:	CEO DISTRICT
				CEO DISTRICT
M/hita_Pa	rmit Desk Green-Assessor's Can	ary-D.P.W. Pink-Pu	blic File Ivory Card-	Inspector