

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8710

Location of Construction:
41 Evergreen Dr
Owner: Robert Young
Lease/Buyer's Name:
Erin Screens Inc
Address:
41 Evergreen Dr - Ptd ME
04103
Contractor Name:
04103

Phone:
Business Name:
Phone:
878-3661
Phone:

PERMIT ISSUED
NOV 21 1996
CITY OF PORTLAND

Zone: CBL
Zoning Approval: 19/NOV/96
Special Zone or Overlay:
Shoreland Conditional
Wetland
Flood Zone
Subdivision
Site Plan area minor Drm

PERMIT ISSUED WITH REQUIRED REVISIONS
Date: 11/18/96
Action:
Approved
Approved with Conditions
Denied
Historic Preservation
Not in District or Landmark
Does Not Require Review
Requires Review

PERMIT FEE: \$25
INSPECTION: Use Group: Type:
Signature: [Signature]
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved
Approved with Conditions
Denied

COST OF WORK: \$
FIRE DEPT: Approved
 Denied
Signature: [Signature]

Proposed Use:
warehouse (XXXX)
wholesale trailers, ONLY

Proposed Project Description:
(for legal current use)
change of use - from warehouse to wholesale trailers, only

Permit Taken By: L Chase
Date Applied For: 11/15/96

- This permit application doesn't 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.

CERTIFICATION
I hereby certify that I am the owner of record of the parcel 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 the jurisdiction. In addition, if a permit for work described in the application issued, I certify that the contractor'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.

41 Evergreen Drive
11/15/96
207/878-3661
PHONE:
ADDRESS:
DATE:
SIGNATURE OF APPLICANT: [Signature]

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE
White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector
PHONE:
CEO DISTRICT: 7
MA-Carroll