City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716						Permit No: Issue Date: 08-0858		e:	: CBL: 343 C013001		
Location of Construction: Owner Name:				Owner Address:							
174 ALLEN AVE CITY OF PORT			TLAND			Г	Phone:				
Bus	iness Name:	Contractor Nar	Contractor Name: City of Portland School Department/		Contra	Contractor Address:			Phone		
		City of Portlar			164 Allen Ave Portland			2078748100			
Lessee/Buyer's Name Phone:		Phone:			Permit Type: Alterations - Commercial				Zone:		
Pas	t Use:	Proposed Use:	Proposed Use: PATHS & Casco Bay High School - Portion of Building "B" - close wall		Perm	Permit Fee: Cost of Wor					
PA	THS & Casco Bay High Sch				\$110.00		\$9,0	9,000.00 5			
				area, window in office		FIRE DEPT: Appro-		ed Use Group:		T.	
		Tor nospitality	area, w				Denied	Use Gi	roup:	Type	
Pro	posed Project Description:				1						
-	rtion of Building "B" - close	wall for hospitality are	a, window in office		Signature:		Signature:				
					PEDESTRIAN ACTIVITIES DISTR			TRICT (RICT (P.A.D.)		
					Action Approved Approve			proved w	ed w/Condition Denied		
					Signat	ure:			Date:		
Permit Taken By: Date Applied For:					Zoning Approval						
	Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Review		OWG	ws Zoning Appeal			Historic Preservation		
1.				Shoreland		Variance			Not in District or Landn		
2.			Wetland			Miscellaneous			Does Not Require Revie		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Flood Zon			Conditional Us			Requires Review		
	False information may invapermit and stop all work		□ Subdivision □ Site Plan			☐ Interpretatio			Approved		
					ite Plan Approved		ed		Approved w/Condition		
			Maj	Mino MM	☐ Denied				☐ Denied		
			Date:			Date:		D	ate:		
I ha juri: shal	reby certify that I am the ow we been authorized by the ov sdiction. In addition, if a per Il have the authority to enter uch permit.	wner to make this appl mit for work described	amed projection in the	as his authorized application is iss	ne prop d agent sued, I	and I agree t certify that th	o conform to ne code office	to all ap cial's au	pplicable laws othorized repre	of this sentative	
SIC	GNATURE OF APPLICAN			ADDRES	S		DATE	E	P	НО	

174 ALLEN AVE Business Name: Lessee/Buyer's Name Dept: Zoning Status:	CITY OF PORTLAND Contractor Name: City of Portland School Phone:	Department/	389 CONGRESS ST Contractor Address: 164 Allen Ave Portland Permit Type: Alterations - Commercia	ial	Phone 2078748100	Zone:
		Department	Permit Type:	al		
Dept: Zoning Status:						
Note: 1) This permit is being approved work. It is understood that all v	-	ted. Any dev	C		Ok to Issue:	
Dept: Building Status: Note:	Pending	Reviewer	:	Approval Dat	e: Ok to Issue:	
Dept: Fire Status: Note: 1) Walls and doors to be 1 hr. Fire 2) The Fire alarm and Sprinkler sy Compliance letters are required	ystems shall be reviewed by a		. 0		e: 07/24 Ok to Issue:	4/2008 ☑
Comments: 7/15/2008-ldobson: TO WHOM IT M	MAY CONCERN FEE WAIV	ED				

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 APPLICAN	ADDRESS	DATE	PHO
DECDONCIDI E DEDCON IN CHADGE OF WORK TIT		DATE	рцо