City of Portland, Maine – Building	g or Use Permit Application	n 389 Congress	Street, (	04101, Tel: (207) 8	74-8703, FAX: 874-8716
ocation of Construction:  Owner:		Phone:		700 7075	Permit No:
340 Allen Ave	Robert Locka			780-7375	
Owner Address:	Lessee/Buyer's Name:	Phone:	Busines	ssName:	PERMIT ISSUED
Contractor Name: Solution Builders, Inc.	Address: 89 Auburn St #1139	04103 Phone	: 780	<b>-</b> 7375	
Past Use:	Proposed Use:	COST OF WORK	<b>K</b> :	PERMIT FEE:	1910 - 1000
commercial	commercial	\$ 3,500 FIRE DEPT. ☑		\$ 40.00 INSPECTION:	CITY OF PORTLAND
			Approved Jenied	Use Group: Type:	
		Signature: 47-	HinL	Signature:	Zone: CBL: 344-E-037
Proposed Project Description:	<u> </u>			ES DISTRICT (P.A.D.)	Zoning Approval: + Courses
Interior Renovations	Action: Approved			Special Zone of Reviews:	
(per plans)	Approved with Conditions:			201101010101	
Replacing Exterior door		Signature: Date:		□ Flood Zone □ Subdivision	
Permit Taken By:	Date Applied For:			Date.	☐ Site Plan maj ☐minor ☐mm ☐
Sherry Pinard February 27, 1998					Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.					☐ Variance ☐ 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 information may invalidate a building permit and stop all work.					☐ Interpretation ☐ Approved
tion may invalidate a building permit and sto	p all work				□ Denied
			WITHER	M/T /-	Historic Preservation  Not in District or Landmark
WITH REQUIREMENTS					☐ Does Not Require Review
				MENTO	☐ Requires Review
				73.	Action:
CERTIFICATION					☐ Appoved
I hereby certify that I am the owner of record of the authorized by the owner to make this application a					_ I <del></del>
if a permit for work described in the application is	issued, I certify that the code official's	authorized representati	ve shall ha		
areas covered by such permit at any reasonable ho	our to enforce the provisions of the code	e(s) applicable to such	permit		Date. Of G 1.0
Casall a Jednisen					m-
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	- 10+5
Yoe Johnson		February 27, 19	998		_
RESPONSIBLE PERSON IN CHARGE OF WORK	K, TITLE			PHONE:	CEO DISTRICT 7
White-Pe	rmit Desk Green-Assessor's Can	ary-D.P.W. Pink-Pul	blic File	Ivory Card-Inspector	L. CArrol