## 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: 1000 Riverside Street 04103 Portland Tuchenhagor Zajac 797-9500 990774 Lessee/Buyer's Name: Phone: Owner Address: BusinessName: Same Permit Issued: Contractor Name: Address: Phone: \*\*\*\* 245 Warren Ave Portland Me. \*\*Maine State Builders COST OF WORK: .111 22 PERMIT FEE: Past Use: Proposed Use: \$ 33,500.00 228.00 **FIRE DEPT.** □ Approved Commercial use INSPECTION: same Use Group: F-2Type: 2 C ☐ Denied CBL: BOCA98 \_1 360-A-004 Signature: Signature: X Zoning, Approvets Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (A.D.) Action: Approved Bathroom renovations enlarge existing Special Zone or Re Approved with Conditions: ☐ Shoreland add toilets etc. Denied □Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐ minor ☐ mm ☐ Permit Taken By: Date Applied For: July 13, 1999 K. Κ. **Zoning Appeal** □ Variance 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 Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation □ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation **□** Not in District or Landmark **PERMIT ISSUED** Does Not Require Review WITH REQUIREMENTS □ Requires Review Action: CERTIFICATION □ Appoved ☐ 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 July 13, 1999 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: 1 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**