City of Portland, Maine - Bu	ilding or Use Permit Applica	ation 389 Co	ongress S	Street, (	04101, Tel: (207)		
Location of Construction: Owner:				Phone:		Permit No: 9 8 1 0 3 7	
		MaryEllen Wh		878-1143		DEDMIT ICCLIED	
Owner Address: SAA 04103	Lessee/Buyer's Name:	Phor	e:	Busines	sName:	PERMIT ISSUED	
Contractor Name:	Address:		Phone:			Permit Issued: SEP   1 1998	
Past Use:	Proposed Use:	COST	F WORK:	 ;	PERMIT FEE:	JEI VI 1866	
		\$	\$ 800.00		\$ 25.00	CITY OF PORTLAND	
l-fam	Samo	FIRE D	EPT. 🗆 Ap				
	Same		☐ Denie			Zoge: CBL:	
		Signatur	·e·		BOCA 96	368-A-004	
Proposed Project Description:			PEDESTRIAN ACTIVITIES DISTRICT (PAD.)			Zoning Approval: 96 P	
		Action:	l l		00	Special Zone or Reviews:	
Shed $(8 \times 12)$		Approved with Conditions:					
			De	enied		□ □ Wetland can be 5 from	
		Signatu	·e•		Date:	☐ Flood Zone ☐ Subdivision	
Permit Taken By:	Date Applied For:	101811414	<u> </u>		Dute.	☐ Site Plan maj ☐minor ☐mm ☐	
MG	04	MA Sept	98			Zoning Appeal	
1. This permit application does not precla	ude the Applicant(s) from meeting applica	able State and Fede	ral rules.			□ Variance	
2. Building permits do not include plumbing, septic or electrical work.						☐ Miscellaneous	
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-						☐ Conditional Use☐ Interpretation	
tion may invalidate a building permit and stop all work						□ Approved	
	1					□Denied	
						Historic Preservation	
						Not in District or Landmark	
						☐ Does Not Require Review	
						☐ Requires Review	
						Action:	
	CERTIFICATION	N				□Appoved	
I hereby certify that I am the owner of reco						een ☐ Approved with Conditions	
authorized by the owner to make this appl							
if a permit for work described in the application areas covered by such permit at any reason					ve the authority to enter	Date:	
areas covered by such perint at any reason	made hour to enforce the provisions of the	e code(s) applicae	ic to such pe	CHIIII			
		09 Sept	0.8				
SIGNATURE OF APPLICANT	ADDRESS:	DAT			PHONE:		
RESPONSIBLE PERSON IN CHARGE OF	F WORK, TITLE				PHONE:	CEO DISTRICT $  u $	
144	hite Desmit Deak Creen Assessed	Conom, D.D.M.	Dink Duke	ie Eile '		Kaine J	
<b>W</b>	hite-Permit Desk Green-Assessor's	Canary-D.P.W.	rink-rubi	IC FIIE	ivory card-inspector	K (/ ]   K   \	