

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 966 Riverside Street Portland 04103		Owner: Blackstrap Associates		Phone: 878-3313		Permit No: 990975	
Owner Address: SAA		Lessee/Buyer's Name: Land Use Consult.		Phone:		BusinessName:	
Contractor Name:		Address:		Phone:		Permit Issued: SEP 10	
Past Use: Comm./office		Proposed Use: same		COST OF WORK: \$ 5,009		PERMIT FEE: \$ 54. ⁰⁰	
Proposed Project Description: 24x24 garage		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type: BOCAD6		Zone: CBL: I-17 360-A-006	
		Signature: [Signature]		Signature: [Signature]		Zoning Approval: 9/8/99	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Action: Approved <input type="checkbox"/>		Approved with Conditions: <input type="checkbox"/>		Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision	
		Denied <input type="checkbox"/>		Signature: Date:		<input checked="" type="checkbox"/> Site Plan major <input type="checkbox"/> Minor <input type="checkbox"/> #19440111	
Permit Taken By: K.		Date Applied For: Aug. 26, 1999 K					

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
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..

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

Aug. 26, 1999

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

- Zoning Appeal**
- Variance
 - Miscellaneous
 - Conditional Use
 - Interpretation
 - Approved
 - Denied

- Historic Preservation**
- Not in District or Landmark
 - Does Not Require Review
 - Requires Review

- Action:**
- Approved
 - Approved with Conditions
 - Denied

Date: [Signature]

PERMIT ISSUED WITH REQUIREMENTS!
CEO DISTRICT