City of Portland, Ma	ine - Bui	lding or Use	Permit Applicat	tion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 04	(207) 874-8703	Fax: (207) 874-8	3716	2014-01923			374 A005001		
Location of Construction: Owner Na			*		er Address:	<del>-</del>		Phone:	
172 AUBURN ST		NORTHERN NEW ENGLAND TELEPHONE OPERATIONS			ELM ST MAN 01				
Business Name:		Contractor Name:		Contractor Address:				Phone:	
Fairpoint Communication	s	Associated Electric		525 Main St South Portland ME 04106			(207) 253-5022		
Lessee/Buyer's Name		Phone:		Permit Type: Foundation Only/Commercial				Zone:	
Past Use:		Proposed Use:			Permit Fee: Cost of Work:			CEO District:	
Telephone Utility Bldg		Same: Telepho	one Utility Bldg	INCD	\$36.00 ECTION:	· · · · · · · · · · · · · · · · · · ·		8	
Proposed Project Description:					ECHON.				
Install cement slab for new generator.									
				PEDESTRIAN ACTIVITIES DISTRICT		(P.A.D.)			
		Action: Approved Approved w/C							
		Signature:			Da	ate:			
Permit Taken By: bjs					Zoning Approval				
This permit application does not preclude the			Special Zone or Reviews		Zon	Zoning Appeal		<b>Historic Preservation</b>	
Applicant(s) from me Federal Rules.			☐ Shoreland		☐ Varian	☐ Variance ☐		Not in District or Landman	
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscell Miscell	llaneous		Does Not Require Review	
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			nce.		Condit	Conditional Use		Requires Review	
					☐ Interpretation		Approved		
					Approv	Approved		Approved w/Conditions	
	] Denied	☐ Denied			Denied				
			Date:		Date:		Date:		
I hereby certify that I am the I have been authorized by jurisdiction. In addition, it shall have the authority to such permit.	the owner to a permit f	to make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agre aed, I certify tha	e to conform to at the code office	all app	licable laws of this thorized representative	
SIGNATURE OF APPLICANT			ADDI	RESS		DATE	PHONE		