Location of Construction:	nstruction: Owner:		Phone:		Permit No:
362 Allen Ave. 04103 People's Heritage		age Bank	Bank 761-8500		QQ0§\$\$6
Owner Address:	Lessee/Buyer's Name:	Phone:	Busines	sName:	
One Portland Square 04101					·
Contractor Name: Address: Phone:					Permit Issued:
Portland Safe Consulting & Design	3 Mallison Falls Rd.	Windham 04062			
Past Use:	Proposed Use:	COST OF WOR	K:	PERMIT FEE:	
Bank	Same	\$ 16,000.00	1	\$ 120.00	AUG 1 5 2000
		FIRE DEPT. 🗗	Approved	INSPECTION:	
			Denied	Use Group: 🕑 Type:	
		Signature: 🗸	um-	BOCA99 Signature: Wilker-	Zone: CBL: 375-C-037
Proposed Project Description:				ES DISTRICT (J.A.D.)	Zoning Approval:
-		Action: Approved			
		Approved with Conditions:		Special Zolle of Reviews.	
Interior Reno/ For countin		Denied	I │ □ Shoreland I │ □ Wetland		
Concrete slab			Demed	L	
		Signature:		Date:	
Permit Taken By:	Date Applied For:	Bighatare.		Dutc	☐ Site Plan maj ⊡minor ⊡mm ⊡
Gayle	GD A	ugust 9,2000			
					Zoning Appeal
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. Building permits do not include plumbing, septic or electrical work. 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 					
					□ Conditional Use □ Interpretation
***Please call Bob Parslow For P/U					Historic Preservation
					Not in District or Landmark
893-1800					Does Not Require Review
			,		Requires Review
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					Action:
					Date:
areas covered of such permit at any reasonable in	providence of the c	(-) F F C -	r		
		August 9,2000			
	ADDRESS:	DATE:		PHONE:	_
SIGNATURE OF APPLICANT	ADDKESS:	DATE:		rnune:	
					PERMIT ISSUED
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:					WEDHORSORIEVEMENTS
					HITH THE GOLDANING
White_P	armit Desk Green-Assessor's C	anary_DPW Pink_P	ublic File	Ivory Card-Inspector	

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

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector