

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

Location of Construction: 117 Auburn St		Owner: Pickus, Owen		Phone:		Permit No: 060796	
Address:		Leasee/Buyer's Name: Mercy Hospital		Phone:		Business Name:	
Contractor Name: Allied Construction		Address: P.O. Box 1396 Portland, ME 04104		Phone: 772-2888		Permit Issued: AUG 13 1996	
Proposed Use: Medical Offices		Proposed Use: Same		COST OF WORK: \$ 33333 65,000.00		PERMIT FEE: \$ 345.00	
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:		Zone: B-2 CBL: 375-C-039	
Detailed Project Description: Make Interior Renovations - 1st fl/left 2nd fl		Signature: <i>[Signature]</i>		Signature:		Zoning Approval: <i>[Signature]</i> 8/12/96	
		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		Signature:		Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> none	
Taken By: Mary Greath		Date Applied For: 09 August 1996		Date:		Zoning Appeal: <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

This permit application doesn't 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.

2 - 36YC 414/30-3078
 415/30-3079

PERMIT ISSUED WITH REQUIREMENTS
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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, for this permit for work described in the application 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

[Signature] 9 August 1996

SIGNATURE OF APPLICANT **Denis Landry** ADDRESS: DATE: PHONE:

Possible Person in Charge of Work, Title PHONE:

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

CEO DISTRICT **7**
[Signature]