## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: **Permit No:** 797-5261 \*\*\*\* Ruth Libby 101051 32 Auburn Street Lessee/Buver's Name: Owner Address: Phone: BusinessName: \*\*\* 252 Virginia Street Portland 04103 Permit Issued: Contractor Name: Address: Phone: 797-6252 Bob Pawloski **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: \$ 144.00 \$ 20,000 same Dairy icecream bar **FIRE DEPT.** □ Approved INSPECTION: ☐ Denied Use Group: M Type: 30 CBL: Zone: BOCA99 375-E-001 Signature: Signature: XXX Zoning Approyal: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT/ Action: Approved Special Zone or Review Approved with Conditions: ☐ Shoreland 4 renovations to roof etc see plans Denied ☐ Flood Zone □ Subdivision Signature: Date: ASite Plan, mai □minor □mm □ Permit Taken By: Date Applied For: Seopt 1 2000 K K □ Variance Arm B This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous () Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation 3. ☐ Approved tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation □ Does Not Require Review PERMITISSUED WITH REQUIREMENTS □ Requires Review Action: CERTIFICATION ☐ Appoved 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 ☐ Approved with-Genditions □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit Sept 1 2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: PERMIT ISSUEE

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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

WITH REQUIRE

**CEO DISTRICT** 

PHONE: