	uilding or Use Permit Application		` <u>_</u> ``	·
Location of Construction: 91 Auburn St	Owner: Shaw's Realty		Phone: 773–0211	Permit No.9 8 0 9 5 2
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	DEDMIT ICCLIED
	Painted Horse			PERMIT ISSUED
Contractor Name:	Address:	Phone:		Permit Issued:
Langford & Low	P.O. Box 662 Ptld, ME	04104	797-5141	AUG 2 6 1998
Past Use:	Proposed Use:	COST OF WORK		
Retail	Same	\$ 4,000.0		CITY OF PORTLAND
Retail	Same	FIRE DEPT.		
		□ De	enied Use Group: MType:	Zone: CBL: 275 0 001
		Signature:	Signature: Holfe	3/3-6-001
Proposed Project Description:		CTIVITIES DISTRICT (P.A.D.	Zoning Approval	
			pproved	Special Zone or Reviews:
Add fire wall with door and upgrade exit and fire alarm		A	pproved with Conditions:	☐ ☐ Shoreland
	10	D	Penied	□ □ Wetland
		g.,	_	☐ Flood Zone
D 1: T 1 D	D . A . I' . I. E	Signature:	Date:	☐ Subdivision☐ Site Plan maj ☐minor ☐mm ☐
Permit Taken By: MG	Date Applied For:	20 August 1998		Li Gitte i i ani i ii aj Li i i i i i i i i i i i i i i i i i i
				Zoning Appeal
1. This permit application does not prec	clude the Applicant(s) from meeting applicable St	ate and Federal rules.		☐ Variance ☐ Miscellaneous
 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
				□ Approved
			TEQUIRENTED	□ Denied
			INENTS	Historic Preservation
			•	☐ Not in District or Landmark
				Does Not Require Review
				☐ Requires Review
				Action:
	CERTIFICATION			
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,				□ Approved een □ Approved with Conditions
	ication is issued, I certify that the code official's a			all
	onable hour to enforce the provisions of the code			Date:
	24	4 August 1998		
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE O	OF WORK, TITLE		PHONE:	CEO DISTRICT / クレ
				Jeo District
V	White–Permit Desk Green–Assessor's Cana	ary–D.P.W. Pink–Pub	lic File Ivory Card-Inspector	