

Closed 1/8/13

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-0068	Issue Date:	CBL: 401 A005001
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Location of Construction: 1361 WASHINGTON AVE	Owner Name: LL BEAN INC	Owner Address: 15 CASCO ST	Phone:
Business Name:	Contractor Name: KJK Wireless	Contractor Address: 8 Providence Ave Falmouth	Phone: 2078998544
Lessee/Buyer's Name	Phone:	Permit Type: Amendment to Commercial	Zone: B2

Past Use: Commercial -	Proposed Use: Commercial - renew and amend permit #041319 add 6 antennas, Equipment cabinets, utilities, cables and assoc equipment to existing tower.	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 4
Proposed Project Description: renew and amend permit #041319 add 6 antennas, Equipment cabinets, utilities, cables and assoc equipment to existing tower.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group Type	Signature: _____ Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____	

Permit Taken By: ldobson	Date Applied For: 01/22/2007	Zoning Approval
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- 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.

Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input checked="" type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MME <input type="checkbox"/> Date 1/22/07 <i>ASB</i>	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 Date _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied <i>ASB</i> Date _____
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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, 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

UHC

NO

PERIODIC
INSPECTIONS