City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Permit No: 980488 Location of Construction: Owner: Phone: City of Portland Back Bay Soccer Field Lessee/Buyer's Name: Phone: Owner Address: BusinessName: Hermit Issued: Phone: Contractor Name: Address: 874-1000 X321 United Way of Greater Portland/Attn: Karen Paquette MAY | 3 1998 COST OF WORK: PERMIT FEE: Past Use: Proposed Use: 35.00 FIRE DEPT. Approved INSPECTION: ☐ Denied Use Group: Type Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTÍVITIES DISTRICT Action: Approved Special Zon Approved with Conditions: ☐ Shoreland Erect Tent for 21 May 1998 Denied П □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Permit Taken By: Date Applied For: 11 May 1998 **Zoning Appeal** □ Variance 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. ☐ 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** □ Not in District or Landmark Call Karen for Pick-Up ☐ Does Not Require Review ☐ Requires Review Action: **CERTIFICATION** ☐ Appoved ☐ Approved with Conditions 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 ☐ 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 11 May 1998 ADDRESS: DATE: SIGNATURE OF APPLICANT PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: **CEO DISTRICT**

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