

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

In Allowance of Construction: 3000 Whipple's Point, P'dg 4C		Owner: Peter Van Wyck		Phone:		Permit No: 941284	
Owner Address:		Leasee/Buyer's Name: 3D Insulation Co. P.O. Box 2763 Portland, ME 04116		Phone: So.		Business Name:	
Contractor Name: self		Address:		Phone:		Permit Issued: PERMIT ISSUED NOV 30 1994	
Past Use: Warehouse		Proposed Use: Warehouse/Of ice		COST OF WORK: \$ 3,000		PERMIT FEE: \$ 40.00	
Proposed Project Description: Change Use/Note Interior Renovations		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION Use Group: B Type: BB 190CA98		CITY OF PORTLAND	
Signature: H.M.P.		Signature: Hoffer		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning: <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	
Permit Taken By: Mary Gresik		Date Applied For: 21 Nov 94		Signature:		Date:	

- 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.

PERMIT ISSUED WITH LETTER

CERTIFICATION
I hereby certify that I am the owner of record of the named project and 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 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 OF APPLICANT: *Jim Duffy* ADDRESS: DATE: 21 Nov 94 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: PHONE:

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

CEO DISTRICT 4
M.A. Curran