Cit	y of Portland, Maine - Bu	ilding or Use	Permit Applicat	ion	Permit No:	Issue Date:	CBL:	
389	Congress Street, 04101 Tel:	(207) 874-8703	8, Fax: (207) 874-8	716	2014-02233		001 C007001	
Loca	tion of Construction:	Owner Name:		Owne	er Address:	-	Phone:	
0 EASTERN PROMENADE		CITY OF PORTLAND		389 CONGRESS ST PORTLAND, ME 04101		D, ME		
Busi	ness Name:							
Lessee/Buyer's Name Phone:				Permit Type:			Zone:	
				Tents			ROS	
	Use:	Proposed Use:	Proposed Use: Same: City Property at the corner		Fee: Cost of Work:		CEO District:	
	y Property at the corner of stern Promenade and Walnut St	of Eastern Pro		INSPI	\$30.00 ECTION:		\$0.00	
	he Olmsted Tree Allee area	Walnut Street in the Olmsted Tree Allee area						
_	osed Project Description:		0 . 1 . 10					
20' 201	x 30' Tent Event; for Casco Bay	Cyclocross Race	- on Octobe 19,	DEDE	DESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
20.								
					Action: Appro	ved w/Conditions Denied		
			Signature:			Date:		
Pern bjs	nit Taken By: Date A		Zoning Approval					
1.	This permit application does no	nt preclude the	Special Zone or R	eviews	Zon	ing Appeal	Historic Preservation	
Applicant(s) from meeting application uses no Applicant (s) from meeting application application and application application uses no Applicant (s) application application uses no Applicant (s) applicant (Shoreland		☐ Variano	ce	Not in District or Landm	
2.	Building permits do not include septic or electrical work.	e plumbing,	plumbing,		Miscell	laneous	Does Not Require Revie	
3.	Building permits are void if wo within six (6) months of the dat	lding permits are void if work is not started hin six (6) months of the date of issuance.			Conditi	ional Use	Requires Review	
	False information may invalida permit and stop all work	Subdivision		Interpre	etation	Approved		
			Site Plan		Approx	ved	Approved w/Conditions	
			Maj Minor Minor N		1M Denied		Denied	
			Date:		Date:		Date:	
			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
T 1		-£	CERTIFICA			:	41 4 41-	
I ha juris shal	reby certify that I am the owner of the very selection. In addition, if a permit I have the authority to enter all an apermit.	to make this app for work describe	lication as his authored in the application	ized a	agent and I agre- ued, I certify tha	e to conform to	all applicable laws of this ial's authorized representative	
SIGNATURE OF APPLICANT			ADDRESS			DATE	PHONE	
DE C	PRONGIDI E DEDGON IN CUA DOS OS	WODE TITLE				DATE	DITONE	
KE	SPONSIBLE PERSON IN CHARGE OF	WUKK, IIILE				DATE	PHONE	