City of Portland, M	Iaine - Bu	ilding or Use 1	Permit Applica	tion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 0	04101 Tel:	(207) 874-8703	, Fax: (207) 874-8	3716	2014-01479			008 A004001	
Location of Construction:		Owner Name:	Owner Address:			Phone:			
358 EASTERN PROMENADE		CITY OF PORTLAND		389 CONGRESS ST PORTLANI 04101		D, ME	(207) 874-8826		
Business Name:									
East End School									
Lessee/Buyer's Name		Phone:	Phone:		it Type:	Zone:			
Maine Yoga Fest				Tents				R3	
Past Use:		Proposed Use:		Perm	Permit Fee: Cost of Work:		CEO District:		
East End School		Same: East En	d School	INSP	\$90.00 ECTION:		\$90.00	1	
Proposed Project Descriptio	n:			1					
Tent Permit Set up on J	a Tent 40x100,								
Mudita Tent 20x30, Ba				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
Family Tent (labeled B remaining tents are 10x		10x10 pop up,All	of the other	Action: Approved Approved w/Conditions Denied Signature: Date:					
Downit Tokon Pro			T	Signature:			Da	ite:	
Permit Taken By: Date Applied For: 1dobson 07/08/2014			Zoning Approval						
This permit application.	l .		Special Zone or R	eviews	Zon	Zoning Appeal		Historic Preservation	
Applicant(s) from Federal Rules.			Shoreland		☐ Variano	☐ Variance		Not in District or Landman	
2. Building permits d septic or electrical	plumbing,	Wetland		Miscell Miscell	Miscellaneous		Does Not Require Review		
3. Building permits a within six (6) mon	hs of the dat	e of issuance.	Flood Zone		Conditi	Conditional Use		Requires Review	
False information repermit and stop all		te a building	☐ Subdivision		Interpre	☐ Interpretation		Approved	
			Site Plan		Approx	ved		Approved w/Conditions	
			Maj Minor MM		Denied	☐ Denied		Denied	
			Date:		Date:	Date:		Date:	
I hereby certify that I an I have been authorized b jurisdiction. In addition shall have the authority such permit.	y the owner, if a permit	to make this appl for work describe	ication as his authord in the application	nat the rized a is issu	proposed work agent and I agre aed, I certify tha	e to conform to at the code office	all app cial's aut	licable laws of this thorized representative	
SIGNATURE OF APPLICA	NT		ADD	RESS		DATE		PHONE	