City of Portland, Maine - E	U			Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101 Te		, Fax: (207) 874-8		2014-00700		012 C012001	
cation of Construction:  Owner Name: FOX HOLE L				r <b>Address:</b> BOX 17851 PO 12	RTLAND, ME	Phone: (207) 332-1513	
Business Name: Casco Bay Butter Inc.	Ivan Gordon	Contractor Name: Ivan Gordon ivangordon123@hotmail.com		ractor Address: orence Street Do	Phone (603) 740-0061		
Lessee/Buyer's Name	Phone:	<u> </u>		it Type:	Zone:		
Jennell Carter	(207) 252-591	(207) 252-5910		ange of Use - Co	B5 R6		
Past Use:	Proposed Use:	Proposed Use:		mit Fee: Cost of Work:		CEO District:	
two family	food production building	food production in accessory building		\$375.00 \$28,000.00 1 INSPECTION:			
Proposed Project Description:			-				
change of use - garage to small so update plumbing & electircal - ins windows	`	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)  Action: Approved Approved w/Conditions			ed w/Conditions Denied		
Permit Taken By: Date	te Applied For:	Signature:  Zoning Approval				Date:	
bjs 0		Zoming Approvai					
This permit application does not preclude the		Special Zone or Reviews		Zonir	ng Appeal	Historic Preservation	
Applicant(s) from meeting applicable State Federal Rules.		Shoreland		☐ Variance	2	Not in District or Landman	
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building</li> </ol>		Wetland		Miscella	neous	Does Not Require Review	
		Flood Zone		Condition		Requires Review	
permit and stop all work	_	Subdivision		Interpretation		Approved	
	Site Plan		Approve	ed	Approved w/Conditions		
	Maj Minor MM		☐ Denied		Denied		
		Date:		Date:		Date:	
I hereby certify that I am the owner I have been authorized by the own jurisdiction. In addition, if a permishall have the authority to enter all such permit.	er to make this appl it for work describe	ication as his autho d in the application	nat the rized a is issu	proposed work in a gree and I agree and I certify that	to conform to the code offici	all applicable laws of this ial's authorized representative	
SIGNATURE OF APPLICANT		ADD	RESS		DATE	PHONE	