						4	
City of Portland, Main	Permit Application	n Per	Permit No: Issue Date:		CBL:		
389 Congress Street, 04101 Tel: (207) 87				1 01- 0 567 1 2 5 2	2001 013 C0110		11001
Location of Construction: Owner Name			Owner Address:			Phone:	
70 Washington Ave Rodriguez I		is A &	70 Washington Ave Portland MAN 207-828-4971			4971	
Business Name: Contractor Name:				Contractor Address: Phone			
n/a	no contractor/	/self	n/a n/a				
Lessee/Buyer's Name Phone:			Permit Type: Zone:				Zone:
n/a n/a			Additions - Commercial			ß -&-	
Past Use: Proposed Use:			Permi	Permit Fee: Cost of Work: CEO District		EO District:	
Commercial / Food Service	Same: Set-up	Same: Set-up 7 Tables w/ 4 Chairs		\$75.00 \$0.00 1			
	Dining. Mail	for Each Table to Allow Outside Dining. Mail Permit to TV Casa 70 Washngton Ave. 04101		FIRE DEPT: Approved Denied INSPECTION: Use Group Type:			
Proposed Project Description:	<u> </u>		-			0-101	1
Set-up Seven Tables w/ For	allow Outside Dining.	Signati	ure:	Sign			
			PEDESTRIAN ACTIVITIES DISTRI		RICT (P.A	CT (P.A.D.)	
			Action	n: Approved App	roved w/Co	ondikas 🔲	Denied
	Signatur		ture:		Date:		
Permit Taken By: cih	Date Applied For: 05/18/2001		Zoning Approval				
	-	Special Zone or Revi	ews	Zoning Appeal		Historic Preservation	
	Shoreland	reland Variance DNot		Not in Distric	t or Landma		
			Miscellaneous		☐ Does Not Require Review ☐ Requires Review ☐ Approved		
			Conditional Use				
			Interpretation				
			Approved	Approved Approved w/Co		Conditions	
			Denied Denied late: Date:		Denied	<u> </u>	
					Date:		
I hereby certify that I am the I have been authorized by th jurisdiction. In addition, if a shall have the authority to ensuch permit.	e owner to make this appl a permit for work describe	lication as his authorizeed in the application is i	he prop d agent ssued, l	and I agree to conform t I certify that the code offi	to all appl icial's aut	licable laws horized repr	of this esentative
CIONATURE OF APPLICATION	. Spanea		~				
SIGNATURE OF APPLICANT	ADDRESS		DATE		PHONE		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				DATE PHONE			 NE