,	y of Portland, Maine		2013-00506	Issue Date	•	013 E016001			
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8								Phone:	
Location of Construction: 38 WASHINGTON AVE		I	KELLEY MICHELLE A		Owner Address: 38 WASHINGTON AVE PORTLAND, ME 04101			Paone:	
Business Name:			Contractor Name: Anderson Works		Contractor Address: 263 Preble Street South Portland ME 04106			Phone (207) 318-8789	
Less	ee/Buyer's Name	Phone:	Phone:		Permit Type: Alterations - Commercial			Zone: B2b R6	
Past	Tico	Proposed Use	Proposed Use:		Permit Fee: Cost of Work:			CEO District:	
l l	lti Use	1 1	Multi Use		i i		3,000.00	1	
					E DEPT: Approved INSPEC		INSPECT Use Group		
Prop	osed Project Description:			1					
Construct "dog house" in front of restaurant w/Soffa			t ·	Signature: Signature:		Signature:			
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved w/Conc Signature: Date				onditions Denied	
Permit Taken By: Date Applied For:									
bjs	· ·	03/15/2013		Zoning Approval					
1.		oes not preclude the	Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation	
1. This permit application does not preclude the Applicant(s) from meeting applicable State Federal Rules.			☐ Shoreland		☐ Varianc	☐ Variance] Not in District or Landmark	
2.	Building permits do not is septic or electrical work.	☐ Wetland		☐ Miscella	Miscellaneous] Does Not Require Review		
3.	Building permits are void within six (6) months of t	he date of issuance.	Flood Zone	☐ Flood Zone ☐ Subdivision		☐ Conditional Use [Requires Review	
	False information may in permit and stop all work.		Subdivision					Approved	
			Site Plan		Approve	ed		Approved w/Conditions	
			Maj Minor MA		Denied			Denied	
			Date:		Date:	Date:		Date:	
that l this j repre	eby certify that I am the or I have been authorized by urisdiction. In addition, it esentative shall have the au (s) applicable to such pern	the owner to make this f a permit for work desc athority to enter all area	application as his au ribed in the applicat	at the pathorization is	proposed work i ed agent and I a issued, I certify	gree to cont that the coo	form to al le official	l applicable laws of 's authorized	
erce	TATEIDE OF A DRI MANT		A DOD	EGG		DATE		PHONE	
SIGN	IATURE OF APPLICANT		ADDR	E99		DAIE		FAUNE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE