## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction:	Owner:		Phone:	Permit No: 000411
111 Cumberland Ave.	Corner Enterprises		N/A	
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	
SAA	Buffalo Wings-N-Things	Not Given	Buffalo Wings-N-Things	Permit Issued:
Contractor Name:	Address: **10 Buttonwood St. S.Ptlar	Phone: Phone: 04106	799–1183	
***Craig Currier, Burr Signs	Proposed Use:	COST OF WORK		WANY 3
Past Use:	Floposed Use.	\$Ø	\$ 36,00	410 · · · · ·
Food/Retail	Same	FIRE DEPT. 🗆 A	pproved INSPECTION: S1914	<b>3</b>
		De De	enied Use Group: Type:	
		Signature:	BOCA99 Signature: Holly	Zone: CBL: 013-F-004
Proposed Project Description:			TIVITIES DISTRICT (P.A.D.)	Zoning Approval:
Reface existing pylon sign, 5 x 6			pproved U	Special Zone or Reviews:
			pproved with Conditions:	Special Lune of Nethews.
			enied [	
				Flood Zone 5/2/2
		Signature:	Date:	□ Subdivision
Permit Taken By:	Date Applied For:			□ Site Plan maj □minor □mm □
UB	~~~~	5-1-00		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				Zoning Appeal
2. Building permits do not include plumbing, septic or electrical work.				Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-				Interpretation
tion may invalidate a building permit and stop all work				
				Denied
		2.55 Store 2.4	PERMIT ISSUED NITH REQUIREMENTS	Historic Preservation ■ Not in District or Landmark □ Does Not Require Review □ Requires Review Action:
	CERTIFICATION			
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been				
authorized by the owner to make this application				
if a permit for work described in the application				
areas covered by such permit at any reasonabl				Date:
	•			
		5 1 00		
SIGNATURE OF APPLICANT	ADDRESS:	5-1-00 DATE:	PHONE:	—
SIGNATURE OF AFFLICANT	ADDRESS.	DATE.	THORE.	DEDMIT ISSUED
				PERMIT ISSUED
<b>RESPONSIBLE PERSON IN CHARGE OF W</b>	ORK, TITLE		PHONE:	WITH REOLUREMENTS
			۱	ub
White	⊢Permit Desk Green–Assessor's Car	ary-D.P.W. Pink-Pub	lic File Ivory Card-Inspector	