Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application	Pe	ermit No:	Issue Dat	te:	CBL:		
389	Congress Street, 04101	Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		05-0124			013 I043	3001	
Location of Construction: Owner Name:				(		Own	Owner Address:			Phone:		
			A & M Partner	Partners Llc		120 Exchange St						
Business Name: Con			Contractor Nan	Contractor Name:			ractor Address	s:		Phone		
			NeoKraft Sign	NeoKraft Signs			686 Main St. Lewiston			207782965	54	
Lessee/Buyer's Name Phone:						Permit Type:					Zone:	
					Signs - Permanent		nt					
Past Use: Proposed Use:					<del>-</del>	Permit Fee: Cost of Work:		ork:	CEO District:			
_			Commercial in	stall 28.5 sf illuminated			\$87.00	\$	886.00	1		
			sign			FIRE DEPT:		Approved	INSPE	SPECTION:		
						Den		_	Use Group:		Type	
								_ Defiled				
Prop	posed Project Description:					1						
Ins	tall a 28.5 sf illuminated si	ign				Signature: Signat			ture:			
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (	T (P.A.D.)		
						Acti	on: Appro	ved  Ap	proved v	v/Condition	Denied	
								т.		ou w/condition beined		
						Sign	ature:			Date:		
	mit Taken By:		pplied For:				Zoning	Approva	l			
dmartin 02/04/20			/2005									
1.	. This permit application does not preclude Applicant(s) from meeting applicable State Federal Rules.		preclude the			ews Zoning Appeal			Historic Preservation			
			able State and			☐ Variance			Not in District or Landm			
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			☐ Does Not Require Revie			
3.				☐ Flood Zon			☐ Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work			Subdivision			☐ Interpretatio			☐ Approved			
			Site Plan			☐ Approved			Approved w/Condition			
			Maj ☐ Minor☐ MM [		☐ Denied			☐ Denied				
				Date:	Date:		Date:		Б	Date:		
							•		1			
					CERTIFICATION	ON						
I ha juris shal	reby certify that I am the over been authorized by the sdiction. In addition, if a plant have the authority to enduch permit.	owner to	o make this appli r work described	cation a	as his authorized application is is	d ager sued,	nt and I agree to I certify that the	to conform ne code offi	to all ap	oplicable laws of athorized repres	of this sentative	
SIG	GNATURE OF APPLICAN				ADDRES	S		DATI	Ξ	P	НО	

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction:	Owner Name:	Owner Address:	Owner Address:		Phone:	
59 Washington Ave	A & M Partners Llc	rtners Llc 120 Exchange St				
Business Name:	Contractor Name:	Contractor Addres	Contractor Address: Phone			
	NeoKraft Signs 686 Main St.		wiston	2077829654		
Lessee/Buyer's Name	Phone:	Permit Type:	Permit Type:		Zone:	
	Signs - Permanent					

 Dept:
 Zoning
 Status: Approved
 Reviewer:
 Marge Schmuckal
 Approval Date:
 02/07/2005

 Note:
 just has the street # "75" on sign over entry
 Ok to Issue:
 ✓

 Dept:
 Building
 Status:
 Approval Date:
 02/14/2005

 Note:
 Ok to Issue:
 ✓

1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

## **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 as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO