	t y of Portland, Maine Congress Street, 04101		O			2014-01667	Issue Date:		014 F021001	
	ation of Construction:	1 et: (2	Owner Name:	, rax: (207) 874-8					Phone:	
73 CONGRESS ST			MUNJOY HILL RESTORATIONS LLC			Owner Address: 40 PORTLAND PIER # 11 PORTLAND , ME 04101			Phone:	
	iness Name: ont Room				1					
Lessee/Buyer's Name			Phone:			Permit Type: Outdoor Seating			Zone:	
Past	Use:		Proposed Use:				Cost of Work:	ork: CEO District:		
Restaurant - First Floor with Five (5) Residential Dwelling Units Above			Restaurant - First Floor with Five (5) Residential Dwelling Units Above		INSP	\$192.00 ECTION:				
_	posed Project Description:		d F (P	g: (c) g! :						
	14 Renewal for Outdoor D d Three (3) Tables - 56 SF.	_	the Front Rooi	m - Six (6) Chairs	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				Action: Approved Approved w/Conditions Denied					
Permit Taken By: Date Applied For:				ı					ate:	
Peri dr	nit Taken By: nc	_	8/2014			Zoning Approval				
This permit application does not Applicant(s) from meeting application Federal Rules.			preclude the	Special Zone or Reviews Shoreland		Zoni	Zoning Appeal Variance		Historic Preservation	
						☐ Varianc			Not in District or Landmar	
 Building permits do not include p septic or electrical work. Building permits are void if work within six (6) months of the date of False information may invalidate permit and stop all work 			_	☐ Wetland		Miscell	Miscellaneous		Does Not Require Review	
			of issuance.	☐ Flood Zone ☐ Subdivision ☐ Site Plan		Conditi	Conditional Use		Requires Review	
			a building			Interpre	_ Interpretation _		Approved	
						Approv	Approved		Approved w/Conditions	
				Maj Minor Minor M	ИМ [Denied			Denied	
				Date:		Date:		Date:		
I ha juri shal	ereby certify that I am the of the been authorized by the sdiction. In addition, if a partition if a partition is a partition to enter the authority to enter the partition.	owner to ermit fo	o make this appl or work describe	lication as his authored in the application	at the ized a	proposed work agent and I agree aed, I certify tha	e to conform to t the code offic	all app ial's aut	licable laws of this thorized representative	
suc!	h permit.									
SIC	NATURE OF APPLICANT		ADD		RESS		DATE		PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE