City of Portland, Maine - Bu	uilding or Use	Permit Applica	uon	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Tel	: (207) 874-8703	Fax: (207) 874-8	8716	2013-02754		016 A006002
Location of Construction:	Owner A		Address:		Phone:	
88 CONGRESS ST (90)	R & J PARTN	NERS LLC PO BC		OX 275 BROOKLIN, ME 04616		4616 (207) 359-4950
Business Name: Contract		actor Name:		ctor Address:	Phone	
Hill Top Coffee Shop	TBA	ТВА		and ME		
Lessee/Buyer's Name	Phone:	Phone:		Type: rations - Comm	Zone: B1	
Past Use:	Proposed Use:	Proposed Use:		Fee:	CEO District:	
retail at #88 and restaurant at #90	_	Same: #88 is retail and #90 is a		Permit Fee: Cost of Work: \$810.00 \$79,000		
restaurant		INSPECTION:			,	
Proposed Project Description: Renovation of existing restaurant f	or new restaurant.	Work is all				
interior. Hood and HVAC permits			STRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: Approved Appr		ved Approv	ed w/Conditions Denied	
			Sig	nature:		Date:
Permit Taken By: Date Applied For: 12/18/2013		Zoning Approval				
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
		Shoreland		☐ Variano	re	Not in District or Landmar
2. Building permits do not include septic or electrical work.	Wetland		Miscell	aneous	Does Not Require Review	
3. Building permits are void if w within six (6) months of the da	Flood Zone		Conditional Use		Requires Review	
False information may invalid permit and stop all work	Subdivision		Interpretation		Approved	
	Site Plan		Approved		Approved w/Conditions	
	Maj Minor MM		Denied		☐ Denied	
	Date:		Date:		Date:	
I hereby certify that I am the owner I have been authorized by the owne jurisdiction. In addition, if a permit shall have the authority to enter all such permit.	r to make this appl t for work describe	lication as his authord in the application	nat the porized ag	ent and I agreed, I certify that	e to conform to t the code offic	all applicable laws of this ial's authorized representative
SIGNATURE OF APPLICANT	ADDRESS			DATE	PHONE	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE					DATE	PHONE