City of Portland, Maine - B	O			Permit		Issue Date:		CBL:	
389 Congress Street, 04101 Tel	1: (207) 874-8703	Fax: (207) 874-8	716	2014	-01714			018 A001001	
Location of Construction: 58 FORE ST	Owner Name: CPB2 LLC	Owner Addr PO BOX 7 04112		BOX 79	dress: X 7987 PORTLAND, ME			Phone: (207) 358-1994	
Business Name:								<u> </u>	
The Portland Company									
Lessee/Buyer's Name	Phone:	Phone:		Permit Type:				Zone:	
Past Use:	Proposed Use:	Proposed Use:		Special Events  Permit Fee: Cost of Work:				R6 WSUZ  CEO District:	
Train Museum - Yacht & Boat	-	Same: Train Museum - Yacht &			\$30.00			\$0.00	
Services - Offices & special events on a regular basis	s Boat Services	Boat Services - Offices & special events on a regular basis		ECTION			,		
Proposed Project Description:	60:1 4 :								
Special Event: Downeast Magazin Set Up Date: 08/13/2014	У	PEDI	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)						
Event Date: 08/14/2014		Action: Approved Approved w/Con				aditions Denied			
			Signature:				te:		
Permit Taken By: Date		Zoning Approval			Approval	Da	<u> </u>		
dmc 08/01/2014									
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews  Shoreland			Zoning Appeal  Variance			Historic Preservation  Not in District or Landmar	
Building permits do not include septic or electrical work.	☐ Wetland			Miscellaneous [			Does Not Require Review		
3. Building permits are void if w within six (6) months of the day	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:		Da	Date:		Date:			
I hereby certify that I am the owner I have been authorized by the owner jurisdiction. In addition, if a permishall have the authority to enter all such permit.	er to make this appl it for work describe	lication as his authored in the application	at the ized a	propos agent ar ued, I ce	nd I agree ertify tha	e to conform to t the code offic	all appl ial's aut	licable laws of this horized representative	
SIGNATURE OF APPLICANT	ADDRESS			DATE			PHONE		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						DATE		PHONE	