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: *** John Colburn 69 Newbury Street 000942 Lessee/Buyer's Name: Phone: Owner Address: SAA ** Uncle Billy's*** Permit Issued: Phone: Contractor Name: Address: SAA **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: 30.00 Commercial Rest. same **FIRE DEPT.** □ Approved **INSPECTION:** Use Group: A3Type: Nre ☐ Denied CBL: Zone: 020-B-004 Signature: Zoning Approve Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved with Conditions: ☐ Shoreland out side dinning Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan mai ☐minor ☐mm ☐ Date Applied For: Permit Taken By: K Aug 21 2000 K Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. ☐ Conditional Use □ Interpretation Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Aistoric Preservation DNot in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: CERTIFICATION ☐ Appoved ☐ Approved with Conditions 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 □ Denied 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 provisions of the code(s) applicable to such permit Aug 21 2000 ADDRESS: PHONE: SIGNATURE OF APPLICANT

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

PHONE:

CEO DISTRICT

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE