

960987

Location of Construction: 86 Newbury St		Owner: Shipyard Brewery		Phone:	
Owner Address:		Leasee/Buyer's Name:		Phone:	
Contractor Name: Keeley Construction		Address: P.O. Box 1074 Ptld, ME 04104		Phone: 773-8499	
Past Use: Brewery		Proposed Use: Same		<b>COST OF WORK:</b> \$ 200,000.00 <b>PERMIT FEE:</b> \$ 1,020.00	
Proposed Project Description: Int/Ext Renovations		<b>FIRE DEPT.</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>[Signature]</i>		<b>INSPECTION:</b> Use Group: F/ Type: 33 Signature: <i>[Signature]</i>	
Permit Taken By: Mary Gresik		Date Applied For: 28 August 1996			

Permit No: 960987

**PERMIT ISSUED**

Permit Issued:  
OCT - 8 1996

**CITY OF PORTLAND**

Zone: 13b CBL: 020-C-009

Zoning Approval: *[Signature]*

**Special Zone or Reviews:**

Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

**Zoning Appeal**

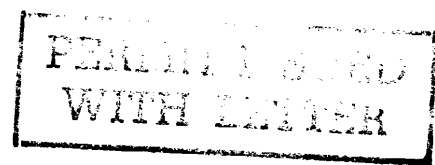
Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

2 - 30 YC      30-3176/14994  
 30-3177/14995



**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 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

*Susan S Skaggs*  
 SIGNATURE OF APPLICANT      Sue Skaggs      ADDRESS:      DATE: 28 August 1996      PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE      PHONE:

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

**Action:**

Approved  
 Approved with/Conditions  
 Denied

Date: *8/30/96*

*[Signature]*

**CEO DISTRICT**

*[Signature]*

