Cit	y of Portland, Maine	e - Build	ling or Use Po	ermit A	Application	P	ermit No:	Issue Dat	e:	CBL:		
389	Congress Street, 0410	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		06-0102			021 F00	6001	
Location of Construction: Owner Name:						Owner Address:				Phone:		
251 CONGRESS ST			PORTLAND ARCHITECTURAL SA			919 CONGRESS ST						
Business Name:  Contractor Name  Maine Bay Car  Lessee/Buyer's Name  Phone:				Name:			tractor Addres	Phone				
				nvas		53 Industrial Way Portland				207878888	2078788888	
						Permit Type:					Zone:	
						Aw	vning, with sig	gnage				
Past Use: Proposed Use:						Permit Fee: Cost of Work		ork:	CEO District:			
				NVY Hair Salon-		\$182.00		\$1	82.00	0 1		
			install 2 awnin	ngs		FIRE DEPT:		Approved	INSPECTION:		'	
						<u></u>		Denied Use C		oup:	Type	
								Demea				
Proj	posed Project Description:	;										
EN	IVY Hair Salon- install 2 a	wnings				Signature: Sig			Signatur	nature:		
							ESTRIAN ACT	IVITIES DIS	TRICT (P	( <b>P.A.D.</b> )		
						Acti	ion: Appro	ved Ap	proved w/	Condition	Denied	
							_	_		_		
				ı		Signature:			Date:			
	mit Taken By:		pplied For:			Zoning Approval						
100	obson	01/23	3/2006	G 117 P 1								
1.	This permit application	•	Special Zone or Revie		ews	ws Zoning Appeal			Historic Preservation			
Applicant(s) from meeting applicable S Federal Rules.			cable State and	Shoreland		☐ Variance			☐ Not in District or Landm			
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			Does Not Require Revie			
3. Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flood Zon			Conditional Us			Requires Review			
False information may invalidate a building permit and stop all work				☐ Su	bdivision		☐ Interpretatio			Approved		
			☐ Si	te Plan		Approved			Approved w/Condition			
				Maj [	Minor MM	☐ Denied			☐ Denied			
				Date:			Date:		Da	Date:		
I ha juris shal	reby certify that I am the ve been authorized by the sdiction. In addition, if a Il have the authority to en uch permit.	e owner to permit fo	o make this appli r work described	med procession and the angle of the second s	as his authorized application is iss	ne pro l agen sued,	nt and I agree I certify that the	to conform he code offi	to all app cial's aut	plicable laws of thorized repres	of this sentative	
SIG	SNATURE OF APPLICAN				ADDRESS	S		DATI	Ξ	Pl	НО	

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

<b>Location of Construction:</b>	Owner Name:		Owner Address:	Phone:	Phone:	
251 CONGRESS ST	PORTLAND ARCHIT	ECTURAL SA	919 CONGRESS ST			
Business Name:	Contractor Name:		Contractor Address:	Phone	Phone	
	Maine Bay Canvas		53 Industrial Way Portland	tland 2078788		
Lessee/Buyer's Name	Phone:		Permit Type:	·	Zone:	
			Awning, with signage			

Dept:ZoningStatus:ApprovedReviewer:Ann MachadoApproval Date:01/30/2006

Note: Change of use permit (06-0021) issued 1/23/06. Ok to Issue:

**Dept:** Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 02/13/2006

Note: Ok to Issue:

1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

## **Comments:**

02/06/2006-jmb: Spoke w/Michelle W. For more info on steel frame, she directed me to Maine Bay Canvas. Left vm w/this business.

02/07/2006-jmb: Spoke w/Dan from ME Canvas, he will fax specs on frame & fastening

02/13/2006-jmb: Received fax from Dan, ok to issue

## **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 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN ADDRESS DATE PHO