Form # P 04

Other

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

Permit Number: 041658

ences of the City of Portland regulating

tures, and of the application on file in

This is to certify that

Marginal Way Properties Inc

stefano

ne and of the

N

PERMIT ISSUED

has permission to

22' x 2' 10' x 10' 3' x 3' signs

AT 211 Marginal Way

024 C00100

ation

NOV 1 8 2004 epting this permit shall comply with all

provided that the person or persons, of the provisions of the Statutes of N the construction, maintenance and u this department.

Apply to Public Works for street line and grade if nature of work requires such information.

ication inspec must n permis and wr procui

of buildings and str

gi dina or be e this t t thereo la Josed-in.

Н R NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept. **Appeal Board**

Department Name

PENALTY FOR REMOVING THIS CARD

				5	TIMEN	1731111		
City of Portland, Maine	- Ruilding or Use	Permit Annlica	tion [Permit No:	Issue Date	- 4	CBL:	
389 Congress Street, 04101	•			04-1658	NOV 1	8 2004	024 C0	01001
Location of Construction:	Owner Name:			Owner Address:			Phone:	
211 Marginal Way	Marginal Way	Marginal Way Properties Inc		87 Sea Meadows Lin TY CF PC 17		CMAINS	ZILAMA,	
Business Name:		Contractor Name:		Contractor man cost			Phone	
	, , , , , , , , , , , , , , , , , , ,	Destefano and Associates		2456 Lafayette Rd Portsmouth			6037651638	
Lessee/Buyer's Name	Phone:	Phone:		Permit Type: Signs - Permanent			Zone:	
Past Use:	Proposed Use:			mit Fee:	Cost of Wor	k. ICE	O District:	1 <u>95</u>
commercial	=	commercial 4 signs		\$372.00 \$372.0			1	
				RE DEPT:	Approved	INSPECTI	ON:	
					Denied	Use Group	$\cdot \mathcal{O}$	Туре: 2/
				_			/-	dlace
D 10 1 10 1 11								
Proposed Project Description: 22' x 2' 10' x 10' 3' x 3' signs	and		Sig	natura:		Signature:	The s	N.X
1'2" x 7'2" two sided sign	and			Signature:			÷ 0 · ·/	
			The State Control of the State		red □ Apr	proved w/Conditions Denied		
					- I			201101
	Signature.			Date:				
dmartin	mit Taken By: Date Applied For: 11/04/2004			Zoning Approval				
		Special Zone or F	eviews Zoning Appeal			Historic Preservation		
 This permit application d Applicant(s) from meetin Federal Rules. 			Variance] Variance		Not in District or Landmark		
2. Building permits do not i septic or electrical work.	nclude plumbing,	☐ Wetland ☐ Miscellaneous		neous	Does Not Require Review			
3. Building permits are voice within six (6) months of the	☐ Flood Zone		Condition	Conditional Use		Requires Review		
False information may in permit and stop all work.	Subdivision		Interpretation			Approved		
		Site Plan		Approve	d		Approved w/	Conditions (
		Maj Minor	MM	Denied			Denied (2
		Date: Lill	104	Date:		Date:		
		,						
		CERTIFICA						
I hereby certify that I am the of I have been authorized by the	owner to make this appl	ication as his author	rized age	ent and I agree	to conform	to all appli	cable laws	of this
jurisdiction. In addition, if a p								
shall have the authority to ente such permit.	er all areas covered by si	ich permit at any re	аѕопарю	e nour to enforc	e the provi	sion of the	code(s) ap	opiicable to
SIGNATURE OF APPLICANT	ADDRESS			DATE		PHONE		
RESPONSIBLE PERSON IN CHAR	GE OF WORK, TITLE				DATE		PHO	NE

Permit Fee (Total)

PLUMBING APPLICATION				Division of Health Engineering					
	PROPERTY	ADDRESS							
Town or Plantation				2004 - 8426					
Stre Subdivisio		7	• 1		7 <u>;</u>	JE TERMINIZE			
	PROPERTY O	WNERS NAME		Date Permit 10 1/3	109	\$ Double Fee			
Last:	Last: Planet Dass - 2//Marsine			() a dow	0.86				
Applic Nam	1 / 1	iving from	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4		1			
Mailing Ad Owner/Ap (If Diffe	plicant				9	· · · · · · · · · · · · · · · · · · ·			
knowled	Owner/Appli that the information subm dge and understand that a ng Inspectors to deny a Pe	Iny falsification is reas	best of my		e installation autho	tion Required orized above and found it to be in Rules.			
	Signature of Owner/	Applicant	Dat	e Local Plumbing Ir	nspector Signature	e Date Approv			
			PERM	IT INFORMATION					
This Ap	This Application is for Type			ure To Be Served:	Plumbing To Be Installed By:				
1. □ NEW PLUMBING 1. □ SINGLE			FAMILY DWI	ELLING	1. 🖫 MASTER PLUMBER				
2. 🗆 RE	2. RELOCATED 2. M			R MOBILE HOME	2. OIL BURNERMAN				
PL	UMBING	3. 🗆 MULTIPI	E FAMILY D	WELLING $_{\widetilde{I}}$	3. ☐ MFG'D. HOUSING DEALER/MECHANK 4. ☐ PUBLIC UTILITY EMPLOYEE				
	4. ੴ OTHER –				5. PROPERTY OWNER				
					LICENS	E# <u> </u>			
Ho	Hook-Up & Piping Relocation Maximum of 1 Hook-Up Number			Column 2 Type of Fixture	Number	Column 1 Type of Fixture			
	HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface		, ,	Hosebibb / Sillcock		Bathtub (and Shower)			
				Floor Drain	Tens.	Shower (Separate)			
				Urinal		Sink			
				Drinking Fountain		Wash Basin			
wastewater disposal system.			Indirect Waste		Water Closet (Toilet)				
	PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.			Water Treatment Softener, Filter, etc.		Clothes Washer			
			1	Grease / Oil Separator		Dish Washer			
				Dental Cuspidor		Garbage Disposal			
YOR			1 ,	Bidet		Laundry Tub			
TRANSFER FEE [\$6.00]		1	Other: (2)15 15/11 K		Water Heater				
			Fixtures (Subtotal) Column 2	£	Fixtures (Subtotal) Column 1				
	1		Y		>	Fixtures (Subtotal) Column 2			
		SEE PER	RMIT FEE S CALCULATI	CHEDULE 100 NG FEE	5	Total Fixtures			
	15				>	Fixture Fee			
					-	Transfer Fee			
				•	1	Hook-Up & Relocation Fee			

TOWN COPY

Page 1 of 1 HHE-211 Rev. 6;94