Location of Construction: 24 Horament Sq	Owner:	*	Phone:	Permit No: 9 7 0 4 4 4
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	
	Coffee By Design, Inc.	620 Congress S	PTId, KE 04101	PERMIT ISSUED
Contractor Name:	Address:	Phone		Permit Issued:
Past Use:	Proposed Use:	COST OF WORK	Y: PERMIT FEE:	MAY 1 3 1997
Coffee Shop	_	FIRE DEPT. A	\$ 25.06 Approved INSPECTION:	CITY OF PORTLAND
active onob	Same		enied Use Group: Typ	oe:
Proposed Project Description:		Signature:	Signature: 74	Zone: CBL: 027-Y-003
110posed 110ject Description:	PEDESTRIAN AC	CTIVITIES DISTRICT (RA.	Zoning Approval:	
Conduct Gutside Dining	A	approved with Conditions:	Special Zone or Reviews: Shoreland Wetland Flood Zone	
Permit Taken By:	D. A. L. LE	Signature: 5/	(a/9) Date: DA	ULZ □ Subdivision
Mary Gresik	Date Applied For:	6 May 1997		☐ Site Plan maj ☐minor ☐mm
 Building permits are void if work is not so tion may invalidate a building permit and 	☐ Conditional Use☐ Interpretation☐ Approved☐ Denied			
			PERMIT ISSUED WITH REQUIREMEN	Historic Preservation Not in District or Landmark Does Not Require Review Requires Review
			•	Action:
	CERTIFICATION			□Appoved
I hereby certify that I am the owner of record of authorized by the owner to make this application if a permit for work described in the application areas covered by such permit at any reasonable	IOII AS DIS AllIDOTIZED agent and I agree to go	nform to all annling L1-1		been Approved with Conditions
areas covered by such permit at any reasonable	le hour to enforce the provisions of the code	(s) applicable to such pe	e shall have the authority to ent ermit	er all Date:
SIGNATURE OF APPLICANT Alan Spe	ar ADDRESS:	O6 May 10 DATE:	997 77) - \$\frac{5533}{PHONE:}	
DEGROVATE PROPERTY				<u> </u>
RESPONSIBLE PERSON IN CHARGE OF W	ORK, TITLE		DUONE	
RESPONSIBLE PERSON IN CHARGE OF W	ORK, TITLE -Permit Desk Green-Assessor's Cana		PHONE:	CEO DISTRICT

OMMENTS							
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12/10/47	Done for	1987.					

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470444							
970444 27-F-3				Inspection Record			
21-1-3		Foundation	Type		Date		
		Framing:					
•		Plumbing: _					
		Final:					

Other: _