Form# P04

DepartmentName

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read	ITY OF PORT	LAND	
Application And Notes, If Any, Attached	PERMIT	Fermit I	PERMIT ISSUED
This is to certify that Mccurtain Bradley C/A			APR 2 g 2005
has permission to Restaurant add 12 chai	irs & 4 oles		
AT 16 Monument Sq		027 F006001	CITY OF PORTLAND
provided that the person or person of the provisions of the Statutes the construction, maintenance at this department.	s of Name and of the	ances of the Cit	mit shall comply with a y of Portland regulatin the application on file i
Apply to Public Works for street line and grade if nature of work requires such information.	N fication inspect in might and with in permission problems of the land or continuous dispersions of the land or continuous REQUIRES.	A certification of procure in the certification of the cert	ficate of occupancy must be ed by owner before this build- part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept.			4/27/05
Health Dept		/m/h	~ /
Other		Director -	Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

	ress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-87						
Location of Construction:	Dwner Name:	adlay C	Owner Address:	APR 2	o 200 Shone		
16 Monument Sq Business Name:	Mccurtain Bra	•	15 Monument Sq				
Jusmess Mame.	Applicant	е.	Contractor Address:	CITY OF F	ooti aar		
Lessee/Buyer's Name	Phone:	7	Permit Type:		UNTIANE	Zone: -5	
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO Distri		
Commercial / Restaurant	Commercial /	Restaurant add 12	\$75.00	\$75.0			
'roposed Project Description:	chairs & 4 Ta	chairs & 4 Tables		Approved	NSPECTION: Jse Group U Type Stat TBC 2403		
Restaurant add 12 chairs & 4	1 Tables		Simulation i	Sig	enature /		
			Signaru 'EDESTRIAN ACTI				
			Action: Approv	ed Approve	ed w/Conditions	Denied	
			Signature:		Date:		
Permit Taken By: ldobson	Date Applied For: 04/15/2005		Zoning Appr				
	04/13/2003	Special Zone or Rev	views Zonin	s Zoning Appeal		Preservation	
1.		Shoreland		Variance		Not in District or Landmark	
2.		Wetland	Miscellar	Miscellaneous		ot Require Review	
3.		Flood Zone	Condition	Conditional Use		Requires Review	
		Subdivision	Interpreta	ation	Approve	ed	
		Site Plan	Approved	d	Approve	ed w/Conditions	
		Maj Minor M OK w Theen Date: S 4/	Denied		Date:	$\overline{\mathbf{x}}$	
		ı	1 7		Date:	<u> </u>	
I hereby certify that I am the of have been authorized by the urisdiction. In addition, if a phall have the authority to ent	owner to make this appl permit for work describe	ication as his authorized in the application is	the proposed work is ed agent and I agree t issued, I certify that t	o conform to al he code official	ll applicable la l's authorized	aws of this representative	

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE

City of Portland, Maine - I	Building or Use Permit	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Te	el: (207) 874-8703, Fax: ((207) 874-8716	05-0418	04/15/2005	027	F006001
Location of Construction:	tion of Construction: Owner Name: Ow				Phone:	
16 Monument Sq	Mccurtain Bradley C		15 Monument Sq			
3usiness Name:	Contractor Name:	(Contractor Address:		Phone	
	Applicant		Portland			
Lessee/Buyer's Name	Phone:	1	Permit Type:			
		L	Outdoor Seating			
	_					
	: Approved with Condition		Marge Schmucka			05/21/2005
Note: 4/20/05 I gave it back to	Lannie - the address is way	off - permit needs	s to be reprinted wi	th the correct location	O Ok to Is	ssue:
All outdoor seating is subject and cleared for pedestrian use	•	om the City's traf	fic engineer who en	nsures that the City s	sidewalk	is open
2) This permit is being approved work.	on the basis of plans submi	itted. Any deviat	ions shall require a	separate approval b	efore sta	rting that
Dept: Building Status	: Approved with Condition	ns Reviewer:	Tammy Munson	Approval D	ate:	04/27/2004
Note:					OktoI	ssue:
1) The outdoor seating must not	block any required means of	f egress from any	buildings.			



Outdoor Seating Permit Application

Location/Address of Construction: 15 Mcm mast Square - Monument Squire #15					
Total Square Footage of Proposed Structu	ure	Square Footage of Lot			
Tax Assessor's Chart, Block & tot Number Chart# Block# Lot#	Owner:	rad McCurtain		Telephone#: 	
Lessee/Buyer's Name (If Applicable) Bruce Rascher		rchaser/Lessee Address: ress Rd. Solostad	Co	ost Of ork: Fee: 75.00	
description: outside seating How many chairs 12 How many tables 4 Contractor's Name, Address & Telephone: Applicants Name, Address & Telephone: Who should we contact when the permit is ready: Brock Rascher > 780 -889 Telephone: 40-9841 If you would like the permit mailed, what mailing address should we use:					

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED.

AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APROVE THIS PERMIT.

Certification

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws or this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

to the position							
Signature of applicant:	₹	rua	V	asilve	Date:	4/11/05	



C/B/L	
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CONDITIONS FOR SIDEWALK OCCUPANCY PERMIT

