Form # P 04

Please Read

Application And

This is to certify that

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

OF PORTLAND

MCRECTION

PERMIT ISSUED

JUN 2 1 2007

Notes, If Any, Attached

CITY OF PORTLAND /n/a

2 day event, tent will come d n first ni has permission to and

r the second day, tent con ing down that day but ND t back u

027 G001001

Permit Number: 070682

AT 456 CONGRESS ST

epting this permit shall comply with all provided that the person or persons rm or lion a ances of the City of Portland regulating of the provisions of the Statutes of ine and of the the construction, maintenance and uctures, and of the application on file in e of buildings and this department.

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

ficatio f inspe on mud n and v en perm on proc re this lding or rt there ed or osed-in COUIRED. UR NO

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

OTHER REQUIRED APPROVALS

reo Cisas Fire Dept.

Health Dept.

Appeal Board

Other

Department Name

PENALTY FOR REMOVING THIS

City of Portland, Maine	e - Buil	ding or Use l	Permi	t Applicatio	n Per	rmit No:	Issue Date	:	CBL:		
389 Congress Street, 04101		_				07-0682	ie /14/	07	027 G0	01001	
Location of Construction:	Owner Name:	wner Name:			Owner Address:			Phone:			
456 CONGRESS ST CITY C		CITY OF POR	TY OF PORTLAND		389 CONGRESS ST						
Business Name: Lessee/Buyer's Name		Contractor Name: n/a Phone:			Contractor Address: n/a Portland Permit Type: Zone:				Phone		
									Zone:		
					Ten	its				18-7	
Past Use:		Proposed Use:		<u> </u>	Permit Fee: Cost of Work:		rk:	CEO District:			
Outside space / Monument Square		-	/ Monument Square				\$30.00		1		
				ntology 2 day event,		DEPT:	Approved	INSPECTION:			
מדמומו	tent will come down first night and be put back up for the second day,		_ Approved								
6/4/01)mu						Denied	14 263 0				
		tent coming down that day at the							se Group: B Type-Type-Type-Type-Type-Type-Type-Type-		
Proposed Project Description:		end of event			1				exig.		
2 day event, tent will come down first night and be pu second day, tent coming down that day at the end of e						ture: Grea	ure: 4/14/07 CL No				
						STRIAN ACT					
						, , ,				Don't d	
					Actio	п: Аррго	ved Ap	proved w	//Conditions	Denied	
				Signature:				Date:			
Permit Taken By:	ermit Taken By: Date Applied For:				Zoning Approval						
dmartin 06/12/2007				Zoning Approvai							
This permit application does not preclude the Applicant(s) from meeting applicable State			Special Zone or Rev		ews Zoning Appeal			Historic Preservation			
			d Shoreland		☐ Variance			Not in District or Landma			
Federal Rules.	Shorefaild										
2. Building permits do not	Jumbina	Wetland			Miscellaneous			Does Not Require Review			
septic or electrical work.	numonig,	- Welland									
3. Building permits are void if work is not started within six (6) months of the date of issuance.			Flood Zone			Conditional Use			Requires Review		
			ica —		conditional coe						
False information may in		Subdivision		☐ Interpretation			Approved				
permit and stop all work									_		
			$ _{\square Si}$	te Plan		Approv	ed		Approved w/	Conditions	
The second secon			Maj ☐ Minor ☐ MM		Denied			☐ Denied ☐			
PI PI										2	
A CONTRACTOR OF THE PARTY OF TH	Second of 1		$ \mathcal{O} $	-11/10/	0	Date:			Date:)	
			3		- /	Date.					
and the second s	A										
CITY OF PO	PHAS	(D									
United											
			(ERTIFICATI	ON						
I hereby certify that I am the c	wner of	record of the na				nosed work is	s authorized	l by the	owner of recor	d and that	
I have been authorized by the											
jurisdiction. In addition, if a p	permit for	r work describe	d in the	application is i	ssued,	I certify that	the code of	ficial's	authorized repr	esentative	
shall have the authority to ente	er all area	as covered by su	ich peri	nit at any reaso	nable l	nour to enforce	ce the prov	ision of	f the code(s) ap	plicable to	
such permit.											
SIGNATURE OF APPLICANT			ADDRESS			DATE			PHONE		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE							DATE	E	PHO	NE	