City of Portland, Ma	aine - Buil	ding or Use	Permit Applicat	tion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 04	4101 Tel: (	207) 874-8703	, Fax: (207) 874-8	3716	2014-01783			028 B001001	
Location of Construction: 350 CONGRESS ST		Owner Name: CITY OF PORTLAND		Owner Address: 389 CONGRESS ST PORTLAND, M 04101			Phone:		
Business Name:									
Pinecone+Chickadee									
Lessee/Buyer's Name		Phone:		Permit Type:				Zone:	
Noah DeFilippis		(207) 415-617	4	Ter	nts			В3	
Past Use: City Park -Lincoln Park		Proposed Use:		Perm	it Fee:	Cost of Work:		CEO District:	
		Same: City Park - Lincoln Park		INSP	\$30.00 ECTION:			2	
Proposed Project Description	:								
2014 Picnic (Music & A	own 8/23/14 - 20' x								
20' tent				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
				Action: Approved Approved w/Conditions Denied  Signature: Date:					
Permit Taken By: Date Applied For:			1				Da	te:	
bjs	3/2014	Zoning Approval							
1. This permit applicat	preclude the	Special Zone or R	eviews	Zoni	Zoning Appeal		Historic Preservation		
Applicant(s) from m Federal Rules.		Shoreland		☐ Variano	Variance [		Not in District or Landmar		
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscell	Miscellaneous		Does Not Require Review	
3. Building permits are within six (6) month	of issuance.	Flood Zone		Conditi	Conditional Use		Requires Review		
False information m permit and stop all v		a building	Subdivision		Interpre	☐ Interpretation		Approved	
			Site Plan		Approv	Approved		Approved w/Conditions	
	Maj Minor MM		Denied	Denied		Denied			
			Date:		Date:	Date:		Date:	
I hereby certify that I am I have been authorized by jurisdiction. In addition, shall have the authority to such permit.	the owner to if a permit fo	o make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to t the code offic	all appl	icable laws of this horized representative	
SIGNATURE OF APPLICANT			ADDI	RESS		DATE		PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE