City of Portland, Maine - Buil	U			Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101 Tel: (2		, Fax: (207) 874-8		2014-00561		028 D003001	
Location of Construction: 290 CONGRESS ST ROMAN CAT OF PORTLAN		THOLIC BISHOP	Owner Address: 510 OCEAN AVE PORTLAND, ME 04103		Phone:		
Business Name: Portland Food Cooperative	Contractor Name: Peter Warren pdw@warrenconstructiongroup.c		Contractor Address: 8 Lambert Road Freeport ME 04032			Phone (207) 865-3522	
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:	
Rachelle Curran Apse	(207) 400-7154		Change of Use - Commercial			B2b R6	
Past Use:	Proposed Use:	roposed Use:		Permit Fee: Cost of Work:		CEO District:	
Personal service & employment office retail grocery sarea (22 seats) food- Portland		to eat prepared			0.00 2		
Proposed Project Description:			1				
Change of uese - Interior fit out for re	etail grocery. &	seating area (22					
seats) for prepared food Entry vestible sidewalk canopy. Rear loading platfor permit - 2014-00054)	inder existing PEDESTRIAN ACTIVITI						
Permit Taken By: Date Ap	plied For:	I				Date.	
	5/2014			Zoning	Zoning Approval		
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zonir	ng Appeal	Historic Preservation	
		Shoreland		☐ Variance	e	Not in District or Landman	
2. Building permits do not include plumbing, septic or electrical work.		Wetland		☐ Miscella	nneous	Does Not Require Review	
3. Building permits are void if work within six (6) months of the date	Flood Zone		Condition	onal Use	Requires Review		
False information may invalidate a building permit and stop all work		Subdivision		Interpret	tation	Approved	
	Site Plan		Approve	ed	Approved w/Conditions		
	Maj Minor MM		☐ Denied		Denied		
		Date:		Date:		Date:	
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit fo shall have the authority to enter all are such permit.	o make this appl or work describe	ication as his author d in the application	at the ized a	proposed work in a gree and I agree and I certify that	to conform to a the code officia	all applicable laws of this al's authorized representative	
SIGNATURE OF APPLICANT		ADDR	RESS		DATE	PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE