						PERI	UZZI TIN	ED			
City of Portland, M	1aine - Bui	ilding or Use	Permi	t Applicatio	n Pe	rnit Ne:	Issue Date:		CBL:		
389 Congress Street, 04101 Tel:		(207) 874-8703, Fax: (207) 874-871			6 02 001 FEB 1 2002 028 K			028 K0	02001		
Location of Construction: Owner Name:					Owner Address:				Phone:		
66 Pearl St Soley Brother				111 Commercial St PORTIA			AÑD	207-775-2252			
Business Name:	Contractor Name				Contractor Address: Phone						
n/a Sign Design					72 Bridge St Westbrook 12078562600						
Lessee/Buyer's Name		Phone:		Perm	Permit Type:				Zone:		
n/a		n/a									
Past Use:		Proposed Use:			Permit Fee: Cost of Work		CEO District:				
		Commercial / Hair Salon; Erect 18" x 120" Sign		Signature Signature Signature Signature Signature Approved Denied					Туре:		
Erect 18" x 120" Sign						}		i an atuma	-+ Mille		
						Signature Signature 7 WW 5 PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				7 *	
					Action Approved Approved W/Conditions Denied						
Permit Taken By:	ermit Taken By: Date Applied For:					Signature: / Date: Zoning Approval					
gg		/04/2002				Zoning	g Approvai				
			Special Zone or Revie		ews Zoning Appeal				Historic Preservation		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Shoreland			☐ Variance			Not in District or Landmar		
2. Building permits do not include plumbing, septic or electrical work.			w	etland	Miscellaneous			_	Does Not Require Review		
3. Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flo	ood Zone		Conditional Use 1		يذا	Requires Review		
False information permit and stop all	e a building	Su	bdivision		☐ Interpretation			Approyed			
			☐ Si	te Pian		Approv	ed	V	Approved w/	Conditions	
			Maj [Oate:	Minor MM	3	Denied) Date	Denied Z	. \	
				·				. . 1	DA Y	mor	
I hereby certify that I an I have been authorized by jurisdiction. In addition shall have the authority such permit.	by the owner to the owner the owne	to make this appli for work described	med proication and in the	as his authorize application is i	he pro d agen ssued,	nt and I agree I certify that	to conform to the code offic	all appl ial's aut	icable laws horized repr	of this esentative	
SIGNATURE OF APPLICANT			ADDRESS			DATE			PHONE		