

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING DEPARTMENT PERMIT

Permit Number: 070940

Please Read Application And Notes, If Any, Attached

This is to certify that LEADER PROPERTIES LLC
has permission to Hanging sign for Maples Org
AT 66 PEARL ST

028 K002001

CITY OF PORTLAND
2007 7 20

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and when permission is procured before this building or part thereof is placed or closed-in. 24 HOUR NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____
Department Name

Thomas M. Markley 8/23/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-0940	Issue Date:	CBL: 028 K002001
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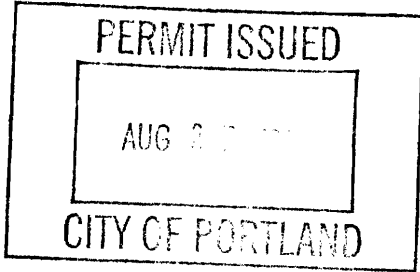
Location of Construction: 66 PEARL ST/ 151 MIDDLE ST	Owner Name: LEADER PROPERTIES LLC	Owner Address: 100 COMMERCIAL ST	Phone:
Business Name: Maples Organics	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name: Kristie Green	Phone: 207-831-5020	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial - retail book store	Proposed Use: Commercial - Hanging sign for Maples Organics - 9.75 sq feet	Permit Fee: \$71.00	Cost of Work: \$71.00	CEO District: 1
Proposed Project Description: Hanging sign for Maples Organics - 9.75 sq ft		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: A2 Type: SB IBC 2003 Signature: <i>Am</i> 8/23/07	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input checked="" type="checkbox"/> Approved ^{yes} <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 08/06/2007	Zoning Approval		
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input checked="" type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input checked="" type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: _____	Date: _____	Date: 8/14/07



B. Andrews

CERTIFICATION

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

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE