Phone: 775-2252 Location of Construction: Owner: Permit No: Tim Soley 991253 (Front of Bldg) 151 Middle Street Owner Address: Lessee/Buyer's Name: Phone: 780–1676 BusinessName: Richard Lowell & Laura O'Meara 111 Commercial Street Casablanca Comics and Permit Issued: Contractor Name: Address: Phone: Games 778 Roosevelt Trail, Windham, ME 04062 893-2011 Steve Grenier Sign-A-Rama Den 12 COST OF WORK: **PERMIT FEE:** Past Use: Proposed Use: \$ 34.80 \$ Ø **FIRE DEPT.** □ Approved **INSPECTION:** Same Commercial/Retail Use Group: 10 Type: 3/3 □ Denied Zone: CBL: MOCAG 028-K-002 Signature: Signature: Proposed Project Description: Zoning/Approval PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Hanging a 36" x 48" double sided sign from existing Approved Special Zone or Rev brackett on front of building. Approved with Conditions: □ Shoreland Denied \Box □ Wetland Flood Zone Signature: Date: □ Subdivision Date Applied For: □ Site Plan maj □minor □mm □ Permit Taken By: 10-25-99 KA Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. Conditional Use 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation □ Approved tion may invalidate a building permit and stop all work... Denied CA11 for Pick Up: Rick Lowell 780-1676 **Historic Preservation** □ Not in District or Landmark Does Not Require Review Requires Review PERMIT ISSUED WITH REQUIREMENTS Action: 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 □ Approved with Conditions 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, Denied 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 Date: TO areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 10-25-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: CEO DISTRICT ub

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

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