		Owner Name:		716	1006	line.	one:
LOGEntion of Construction:Owner Name:47 Middle StMalone Josen		M&	30 High	1 1	P	one:	
Business Name: Contractor Name				or Address		one	
n/a Superior Fire				Contractor Address JIISSI LIW - Poone Portland			
Lessee/Buyer's Name Phone:							
n/a n/a		n/a		Alterat	Alterations - Commercial		B-Z
Past Use:		Proposed Use:					
Commercial / Restaurant Commercial vent, hood, system.			Restaurant; Upgrade		\$78.00 / \$9,000.00 1		
		system.	d fire suppression		Denied Use		PECTION: Group: SA Type: N
Proposed Project Description: Upgrade vent hood, and fire suppression system. KSEL Reference			NS Pectron K NS Pectron K BACK FTUShjetoj	Signature ?EDEST! Action: Signature	Signature: Signature ?EDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved Approved w/Conditions Signature: Date:		
ermit Taken By:	Date	e Applied For:		Zoning Approval			
gg 10/18/2001				····			
1. This permit ap	plication does r	not preclude the	Special Zone or Rev	views	Zoning Appeal	Hist	oric Preservation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		Not in District or Landmark	
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous [Does Not Require Review	
 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 			Flood Zone		Conditional Use	onal Use Requires Review	
			Subdivision		Interpretation	Apj	proved
			Site Plan		Approved	App App	proved w/Conditions

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

1

115/01 - Checked bough opening of duct exit Through Wall - OK per approved drawing dated Through Wall - OK per approved drawing dated 11/1/01 - They Will now mount "mushroom" and Call for Inspection. @ 11/13/01 Work Completed THB per plan De