

Location of Construction: 94 Commercial Street front side		Owner: BMC Inc.		Phone: 878-4209		Permit No: <b>990986</b>
Owner Address: SAA		Lessee/Buyer's Name: Nappi and sons inc.		Phone: BusinessName:		
Contractor Name: Burr Signs		Address: 10 Buttonwood St so Portland		Phone:		Permit Issued: <b>ISSUED</b> <b>SEP 13 1999</b>
Past Use: Bar and Grill		Proposed Use: same		<b>COST OF WORK:</b> \$ <b>PERMIT FEE:</b> \$ 33.08 <b>FIRE DEPT.</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied <b>INSPECTION:</b> 519997 Use Group: Type: Signature: Signature:		
Proposed Project Description: 15.4 sf building sign				<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b> Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: Date:		Zone: <b>B-3</b> <b>CBL:</b> 030 A 005 Zoning Approval: <b>OK 9/3/99</b> <b>Special Zone or Reviews:</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
Permit Taken By: K		Date Applied For: Aug. 24 1999 K				

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

John 878-7901 \*\*\*

**PERMIT ISSUED  
WITH REQUIREMENTS**

**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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT \_\_\_\_\_ ADDRESS: \_\_\_\_\_ DATE: **Aug. 25. 1999** PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

**White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector**

**Zoning Appeal**

- ☐ Variance
- ☐ Miscellaneous
- ☐ Conditional Use
- ☐ Interpretation
- ☐ Approved
- ☒ Denied

**Historic Preservation**

- ☐ Not in District or Landmark
- ☐ Does Not Require Review
- ☒ Requires Review

**Action:**

- ☒ Approved
- ☐ Approved with Conditions
- ☐ Denied

Date: **to D.A. 9/3/99**

**DA 9/13/99**

**CEO DISTRICT**

**1**