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

Location of Construction:	Owner:		Phone:		Permit No:
83 Exchange St.	Wellin Co.			773-4731	660740
Owner Address:	Lessee/Buyer's Name:	Phone:	Business		000749
83 Exchange St.	Dennis Machesi	N/A		N/A	Permit Issued:
Contractor Name: N/A	Address:	Phone:			Permit issued:
Past Use:	Proposed Use:	COST OF WORK	:	PERMIT FEE:	11 16 1 2 10 200
ast Use.	•	\$200.00			JUL 1 n 2000
Restaurant	Restaurant w/ outside	FIRE DEPT. □ Approved □ Denied		INSPECTION:	
	seating			Use Group: A 3 Type 3 12	
				BOCA99-1 01	Zone: CBL: 032-D-004
D I Decise to Decision to the control of the		Signature:		Signature: Affac	
Proposed Project Description:				S DISTRICT (F.A.D.)	Zoning Approved Conductor
			pproved		Special Zone or Reviews:
				vith Conditions:	Shoreland 7/10/60
		D	enied		☐ Wetland
		Signature:		Date:	☐ Subdivision
Permit Taken By:	Date Applied For:				☐ Site Plan maj ☐minor ☐mm ☐
Permit Taken By: Gayle	Ju.	ly 7, 2000 GG			
					Zoning Appeal
	de the Applicant(s) from meeting applicable Sta	ate and Federal rules.			☐ Variance ☐ Miscellaneous
2. Building permits do not include plumbing, septic or electrical work.					☐ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-					□ Interpretation
tion may invalidate a building permit	and stop all work				□Approved
					☐ Denied
					Historic Preservation
					☐ Not in District or Landmark
					□ Does Not Require Review
					☐ Requires Review
					Action:
			PE	RMIT ISSUED	
CERTIFICATION WITH REQUIREMENTS 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					□Appoved
					☐ Approved with Conditions
	cation as his authorized agent and I agree to con				□ Denied
·· F	ation is issued, I certify that the code official's a	-		ve the authority to enter all	Date:
areas covered by such permit at any reason	able hour to enforce the provisions of the code	(s) applicable to such p	cmil		
CACALITY IN F. OF A DRY AGA NO	ADDRESS	July 7, 2000		DHONE	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	PERMIT ISSUED
					TOURDEMENTS
RESPONSIBLE PERSON IN CHARGE OF	WORK, TITLE			PHONE:	CEO DISTRICT
W	hite–Permit Desk Green–Assessor's Cana	ry-D.P.W. Pink-Pub	lic File 1	vory Card-Inspector	