

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

Location of Construction: 19 Exchange St		Owner: Ocean Block Associates		Phone:		Permit No: 961098 PERMIT ISSUED Permit Issued: NOV - 7 1996 CITY OF PORTLAND		
Owner Address:		Leasee/Buyer's Name: Rooster Candle & Bath 19 Exchange St		Phone:			Business Name: Portland, ME 04101	
Contractor Name: Scarborough Signs		Address: Scarborough		Phone: 774-8289			COST OF WORK: \$ _____ PERMIT FEE: \$ 26.50	
Past Use: Retail		Proposed Use: Same		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied			INSPECTION: Use Group: Type: COCA 96 Signature: <i>[Signature]</i>	
Proposed Project Description: Erect Signage 15 Sq Ft				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: <i>[Signature]</i> Date: 11/1/96		Zone: <i>B-3</i> CBL: 032-F-001 Zoning Approval: Special Zone or Reviews: <i>OK 10/23/96</i> <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: Mary Gresik		Date Applied For: 21 October 1996				Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied		

1. This permit application doesn't 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..

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 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

Gilbert Galli 19 EXCHANGE
 SIGNATURE OF APPLICANT Gilbert Galli ADDRESS: DATE: 21 October 1996 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

Action:
 Approved
 Approved with Conditions
 Denied
 Date: 11/1/96

D. Andrews

CEO DISTRICT **2**
A. Row