Location of Construction:	Owner:	Pho	ne:	Permit No: 7 0 8 1 7
Owner Address:	Lessee/Buyer's Name:	Phone: Busi	nessName:	
Courtes store Nomes	Portaged to Tute	Phone:		PERMIT ISSUED
Contractor Name:	Address:		-7491	l l
Past Use:	Proposed Use:	COST OF WORK:	PERMIT FEE:	JUL 2 9 1997
		\$	\$ 25.00	
24.29 S.	1000	FIRE DEPT. Approv		CITY OF DODTI AND
	ливолые Тэскару	☐ Denied	Use Group: Type:	CITY OF PORTLAND
		Simple Market State	· 2 6:	Zone: CBL: (32-1-00)
Proposed Project Description:		Signature: 77 77	Signature: TIES DISTRICT (P.A.D.)	Zoning Approval:
		Action: Approve	The state of the s	Special Zone or Reviews
Change Can - Acd Message Thereps		The T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		☐ Special Zone or Reviews: ☐ Shoreland
		Denied		□ □ Wetland
				☐ Flood Zone
		Signature:	Date:	☐ Subdivision / (☐ Site Plan maj ☐ minor ☐ mm l
Permit Taken By:	Date Applied For:	. i Julij. 1997		Total maj diminor diminor
				Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
2. Building permits do not include plumbing, septic or electrical work.				☐ Miscellaneous ☐ Conditional Use
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				□ Interpretation
				□Approved
		*		□ Denied
				Historic Preservation
WITH REQUIREMENTS				□ Not in District or Landmark
		WHITE THE	ISSUED	☐ Does Not Require Review ☐ Requires Review
		-	WUREMENT	Drivedulles Keview
			-1418	Action:
	CERTIFICATION			□Appoved
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 applicat				· · · · · · · · · · · · · · · · ·
if a permit for work described in the application	on is issued, I certify that the code officia	al's authorized representative shal		11
areas covered by such permit at any reasonab	le hour to enforce the provisions of the	code(s) applicable to such permit		Date:
		33 Into 1897		
SIGNATURE OF APPLICANT Weeking	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF W	VORK, TITLE		PHONE:	CEO DISTRICT
	Permit Desk Green-Assessor's	Conom. D.D.W. Dink Doklin Ell		1