

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

Permit No: 03-1394	Issue Date:	CBL: 032 F005001
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Location of Construction: 363 Fore St	Owner Name: Eleven Exchange LLC	Owner Address:	Phone:
Business Name: n/a	Contractor Name: Alliance Construction, Inc.	Contractor Address: 160 Pleasant Hill Road Scarborough	Phone 2078850855
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Signs - Permanent	Zone:

Past Use: Vacant / Retail	Proposed Use: Restaurant / Erect 93.83 sq. Ft. Sign	Permit Fee: \$187.66	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Erect 93.83 sq. Ft. Sign		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature:		Date:		

Permit Taken By: gg	Date Applied For: 11/07/2003	Zoning Approval		
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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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date:	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied Date:
	Date:	Date:	Date:

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 APPLICAN _____ ADDRESS _____ DATE _____ PHO _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT _____ DATE _____ PHO _____

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Dept: Historical	Status: Approved with Conditions	Reviewer: Deborah Andrews	Approval Date: 12/12/2003
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Approval based on revised signage proposal, submitted 12/11/2003			
Dept: Zoning	Status: Approved with Conditions	Reviewer: Marge Schmuckal	Approval Date: 12/16/2003
Note: 11/24/03 There are two separate proposals for signage. I spoke to Danny B and he said the plans would probably change because it was going thru Historic review. I told him to get me copies of those plans - permit on hold til then 12/16/03 Received copies of the new plans - ok per those plans	Ok to Issue: <input checked="" type="checkbox"/>		
1) This permit is being approved on the basis of plans submitted on 12/16/03. Any deviations shall require a separate approval before starting that work.			
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 12/17/2003
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Signage Installation to comply with Chapter 31 BOCA 1999			

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SIGNATURE OF APPLICAN

ADDRESS

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO