City of Portland, Maine - Bu	U			2014-00480	Issue Date:	032 F009001	
389 Congress Street, 04101 Tel	· , ,	, Fax: (207) 874-8				<u>_</u>	
Location of Construction:  30 MILK ST @ 21 EXCHANGE STREET  OWNER Name: OCEAN BLO		CK ASSOCIATES	Owner Address: 42 MARKET ST PORTLAND, ME 04101		Phone:		
Business Name: The Paper Patch	Contractor Name	Contractor Name:		actor Address:	Phone		
Lessee/Buyer's Name Phone:			Permit Type:			Zone:	
Rob Sevigny	(207) 774-312	(207) 774-3125		ns - Side Walk	В3		
Past Use:	Proposed Use:	-		Permit Fee: Cost of W		CEO District:	
Retail- first floor  Same: Retail 1 Patch		st floor - Paper	INSPI	\$26.40 ECTION:	\$1,0	000.00 2	
Proposed Project Description:							
install a sidewalk sign		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)  Action: Approved Approved w/Co					
						(P.A.D.)  ved w/Conditions Denied	
			S	ignature:		Date:	
·	Applied For: 11/2014			Zoning	<b>Approval</b>		
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation	
		Shoreland		☐ Variance	e	Not in District or Landr	nar
		started Flood Zone ance.		Miscella	aneous	Does Not Require Review	ew
				Condition	onal Use	Requires Review	
				Interpre	tation	Approved	
				Approv	ed	Approved w/Conditions	š
		Maj Minor MM		Denied		Denied	
		Date:		Date:		Date:	
I hereby certify that I am the owner I have been authorized by the owne jurisdiction. In addition, if a permit shall have the authority to enter all a such permit.	r to make this appl for work describe	lication as his authored in the application	at the ized a	proposed work agent and I agree aed, I certify that	e to conform to t the code offic	all applicable laws of this ial's authorized representati	ive
SIGNATURE OF APPLICANT		ADDR	ESS		DATE	PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE