## Location of Construction: Owner: Phone: Permit No: 04101 15 Temple Street None Given City of Portland · · · · · · 51 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 389 Congress Street 04101 Fresh Samantha N/A Fresh Samantha Permit Issued: Contractor Name: Address: Phone: Monty Hagen None Given 828-9664 **0**C.1 COST OF WORK: Proposed Use: **PERMIT FEE:** Past Use: Ø \$ \$ 36.40 ۰. پ Retail/Food Same INSPECTION: SI 911 Ago FIRE DEPT. Approved Use Group: □ Denied Type: Zone: CBL: BOCA96 032-H-004 Signature: Signature: 🖌 fals Proposed Project Description: Zoning Approva PEDESTRIAN ACTIVITIES DISTRICT (A.D.) Action: Approved Ø Special Zone or Review 1 Building Sign 4' x 8' Rigid Foam Carved Sign. Approved with Conditions: □ Shoreland Denied □ Wetland □ Flood Zone Signature: Date: □ Subdivision □ Site Plan maj □minor □mm □ Permit Taken By: Date Applied For: KA 10-7-99 Zoning Appeal This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. □ Variance 1. □ Miscellaneous 2. Building permits do not include plumbing, septic or electrical work. Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-3. □ Interpretation tion may invalidate a building permit and stop all work... □ Approved Denied \*\*\*Call for Pick Up: Monty Hagen 828-9664 Historic Preservation DrNot in District or Landmark Does Not Require Review **Requires** Review PERMIT ISSUED WITH REQUIREMENTS 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 □ Approved with Conditions 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, Denied 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 Date: 10 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 10 - 7 - 99PERMIT ISSUED SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: WITH REQUIREMENTS **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: 1 **CEO DISTRICT** ub White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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