City of Portland, Maine - Build	_			Per	rmit No: 07-1300	Issue Dat	e:	CBL: 032 H02	2001
389 Congress Street, 04101 Tel: (207) 874-8703, Location of Construction: Owner Name:				Owner Address:		Phone:			
193 MIDDLE ST SAVI REALTY					21 LOOKOUT DR			2 1101100	
Business Name: Contractor Nam		e: Contractor		actor Address	ctor Address:		Phone	Phone	
Lessee/Buyer's Name	Phone:				t Type: endment to Co	e: ent to Commercial			Zone:
		Hair Salon - Permit lled on previous permit				000.00 1			
				Approved		INSPECTION: Use Group: Type		Type	
Proposed Project Description: Permit Kitchen installed on previous pe	ermit #070392			Signat			Signatu		
					PEDESTRIAN ACTIVITIES DISTRICT Action Approved Approved Approved				
		Signature:			Date:				
				Zoning Approval					
1. This permit application does not p	preclude the	Spec	ial Zone or Revi	ews	Zonin	g Appeal		Historic Preservation	
Applicant(s) from meeting applicable Sta Federal Rules.		Shoreland			☐ Variance			Not in District or Landn	
2. Building permits do not include passeptic or electrical work.	Building permits do not include plumbing, septic or electrical work.		☐ Wetland		Miscellaneous			Does Not Require Revie	
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		☐ Flood Zon			Conditional Us			Requires Review	
		Subdivision			☐ Interpretatio			Approved	
		Site Plan			Approved			Approved w/Condition	
		Maj Mino MM		☐ Denied		Denied			
		Date:			Date:		D	ate:	
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all are to such permit.	make this appli work described	med procession and the second	as his authorized application is iss	ne prop l agent sued, I	t and I agree t certify that th	o conform t e code offic	o all ap cial's au	plicable laws of thorized repres	of this sentative
SIGNATURE OF APPLICAN			ADDRESS	S		DATE		Pl	НО

Location of Construction:	Owner Name:		Owner Address:		Phone:	
193 MIDDLE ST	SAVI REALTY LLC	SAVI REALTY LLC				
Business Name:	Contractor Name:	Contractor Name:		Contractor Address:		
Lessee/Buyer's Name	Phone:		Permit Type: Amendment to Comm	nercial		Zone:
Note:	Status: Approved with Conditionary				Ok to Issue	_
work. 2) The kitchen and the wait	ting area on the second floor whe	re the food will	be served is for the Ak	ari customers only.		
2) The kitchen and the wait Dept: Building S Note: 1) New commercial kitcher	Status: Approved with Condition and eating areas must meet the r	ns Reviewer:	Jeanine Bourke he City and State Food	Approval Date	e: 11/0 Ok to Issue	e: 🔽
 2) The kitchen and the wait Dept: Building S Note: 1) New commercial kitcher required. Hood permits 2) Separate permits are requ 	Status: Approved with Condition	requirements of to any grease or stea or HVAC system	Jeanine Bourke he City and State Food m. ns.	Approval Date	e: 11/0 Ok to Issue	e: 🗸
Dept: Building S Note: 1) New commercial kitcher required. Hood permits 2) Separate permits are required. Separate plans may need.	Status: Approved with Condition in and eating areas must meet the rare required for appliances creating aired for any electrical, plumbing,	requirements of to ng grease or stea or HVAC system a part of this pro-	Jeanine Bourke he City and State Food m. ms. ocess.	Approval Date	e: 11/0 Ok to Issue able license	
Dept: Building S Note: 1) New commercial kitcher required. Hood permits 2) Separate permits are required. Separate plans may need.	Status: Approved with Condition in and eating areas must meet the rare required for appliances creating aired for any electrical, plumbing, if to be submitted for approval as	requirements of to ng grease or stea or HVAC system a part of this pro-	Jeanine Bourke he City and State Food m. ms. ocess.	Approval Date Codes. All applica	e: 11/0 Ok to Issue able license	e: 🔽 es are

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.

DEGRONGINI E DEDGON IN CHARGE OF WORK TIT		DATE	DITO
SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО