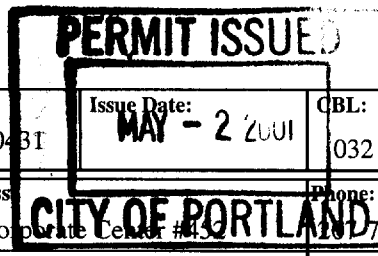


City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 01-04 BT	Issue Date: MAY - 2 2001	GBL: 032 1008001
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Location of Construction: 44 Exchange St	Owner Name: Goldy Robert I & The	Owner Address: 5 Radnor Corporate Center #150	Phone: 773-8084
Business Name: Natasha's	Contractor Name: no contractor/self	Contractor Address: n/a n/a	Phone:
Lessee/Buyer's Name: Natasha's	Phone: n/a	Permit Type: Additions - Commercial	Zone: B-3

Past Use: Commercial / Food Service	Proposed Use: Same; Set-Up for Outside Dining. Call E>R. Perlman when ready 871-7595.	Permit Fee: \$75.00	Cost of Work: \$3,000.00	CEO District: 1
Proposed Project Description: Set-Up 8 Tables for Outside Dining.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>Outside Dining</i> Type: PERMIT ISSUED WITH REQUIREMENTS	

Signature: _____
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.):
 Action: Approved Approved w/Conditions Denied
 Signature: _____ Date: _____

Permit Taken By: cjh	Date Applied For: 04/26/2001	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 Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>5/1/01</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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PERMIT ISSUED WITH REQUIREMENTS

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 APPLICANT	ADDRESS	DATE	PHONE
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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