389 Congress Street, 04101 Tel: ( Location of Construction: 3 CANAL PLAZA  Business Name: Foreside	207) 874-8703 Owner Name: COW PLAZA	· · · · · · · · · · · · · · · · · · ·		2014-00752 r Address:		032 I023001
3 CANAL PLAZA  Business Name:			Owne	r Address		
Business Name:	COW PLAZA		Owner			Phone:
		3 LLC 100 CC ME 04			LST PORTLAN	ND ,
Foreside	Business Name: Contractor Name		: Contract			Phone
Foreside Monaghan Wo					Suite 212 Portla	and (207) 775-2683
Lessee/Buyer's Name Phone:			Permit Type:			Zone:
Kristen M. Nadeau (207) 553-194		-8 Alter		erations - Comm	ercial	В3
Past Use: Proposed Use:		Permit F		it Fee:	Cost of Work:	CEO District:
offices Same: offices			\$670.00 \$65 INSPECTION:		\$65,00	0.00 2
Proposed Project Description: INTERIOR RENOVATION FOR FO	ORESIDE OFFI	CES, 6th Floor				
	· ·		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
		Action: Approved Approved w/Co			d w/Conditions Denied	
	Signature:			Date:		
	Date Applied For: 04/16/2014		Zoning Approval			
This permit application does not preclude the		Special Zone or Ro	eviews	Zonii	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Variance	e	Not in District or Landman
2. Building permits do not include septic or electrical work.	☐ Wetland		Miscella	aneous	Does Not Require Review	
3. Building permits are void if work within six (6) months of the date	Flood Zone		Condition	onal Use	Requires Review	
False information may invalidate a building permit and stop all work		Subdivision		Interpret	tation	Approved
		Site Plan		Approve	ed	Approved w/Conditions
	Maj Minor MM		Denied		Denied	
		Date:		Date:		Date:
I hereby certify that I am the owner of I have been authorized by the owner t jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit.	o make this appl or work describe	ication as his authord in the application	at the rized a is issu	proposed work i gent and I agree led, I certify that	to conform to a the code officia	ll applicable laws of this il's authorized representative
SIGNATURE OF APPLICANT		ADDF	RESS		DATE	PHONE