

Permit No: **961047**

Location of Construction: 3 Wharf St		Owner: Sawyer, Harrison		Phone:	
Owner Address:		Leasee/Buyer's Name: Oh! You Lucky Dog		Phone:	
Contractor Name: Graphic Signs		Address: Cumberland		Phone:	
Past Use: Retail		Proposed Use: Same		COST OF WORK: \$	
				PERMIT FEE: \$ 26.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: Type:	
Proposed Project Description: Erect Signage				Signature: <i>Nuffen</i>	
				Signature: _____ Date: _____	
Permit Taken By: Mary Gresik		Date Applied For: 11 October 1996			

PERMIT ISSUED
 Permit Issued:
 OCT 21 1996
CITY OF PORTLAND

Zones: **B-3** CBL: 032-J-002
 Zoning Approval: *OK - 10/16/96*
Special Zone or Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review
 Action: *discuss with*
 Approved *H.P. Staff*
 Approved with Conditions
 Denied

Date: 10/15/96

Existing Lighting to be revised per discussion with
D. Andrew B

1. This permit application doesn't 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..

Linda Workman
 149 Foreside Rd
 Cumberland Foreside, ME 04110
 781-7044

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 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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT *Linda Workman* ADDRESS: _____ DATE: 11 October 1996 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT **2**
A. Rowle