City of Portland, Maine -	C		uon	Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101	Tel: (207) 874-8703	s, Fax: (207) 874-8	3716	2014-01393		032 J004001	
Location of Construction: 396 FORE ST			Owner Address:  396 FORE ST PO 04101		RTLAND , ME	Phone:	
Business Name: Gritty McDuffs			1			L	
Sincy Medans							
Lessee/Buyer's Name Phone:		Permit T		Type:		Zone:	
Jacob Condon	, ,	(207) 409-5334		loor Seating	B3		
Past Use:	Proposed Use:			mit Fee: Cost of Work:		CEO District:	
Restaurant (Gritty McDuffs)	Restaurant (G	Restaurant (Gritty McDuffs)		\$640.00 CTION:	<u> </u>	\$0.00 2	
Proposed Project Description: 2014 Renewal for Gritty McDu	iffs - Outside Seating	4 Picnic Tables -					
280 sq ft on Wharf Street in rea		PEDESTRIAN ACTIVITIES DISTRICT  Action: Approved Approved  Signature:		TIES DISTRICT	T (P.A.D.)		
				ved Approv	ved w/Conditions Denied		
					Date:		
Permit Taken By: bjs	Date Applied For: 06/25/2014		Zoning Approval				
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation	
		Shoreland		☐ Variano	ee	☐ Not in District or Landmar	
2. Building permits do not in septic or electrical work.	Wetland		Miscell	aneous	Does Not Require Review		
3. Building permits are void within six (6) months of the	Flood Zone		Conditi	onal Use	Requires Review		
False information may inverse permit and stop all work	Subdivision		Interpre	etation	Approved		
	Site Plan		Approv	ed	Approved w/Conditions		
	Maj Minor MM		Denied		Denied		
	Date:		Date:		Date:		
		CERTIFICA	TION				
I hereby certify that I am the ow I have been authorized by the or jurisdiction. In addition, if a pe shall have the authority to enter such permit.	wner to make this appl rmit for work describe	amed property, or the lication as his authored in the application	nat the prized aging is is issue	oroposed work gent and I agree ed, I certify tha	e to conform to t the code offic	all applicable laws of this ial's authorized representative	
SIGNATURE OF APPLICANT	ADDRESS			DATE	PHONE		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE					DATE	PHONE	