

Location of Construction: Owner Name:					Owner Address:				Phone:		
1 Monument Sq			One Monument School			CHARLE STILL	200 T	AMI.			
Business Name:						Contractor Address: Phone					
n/a											
Lessee/Buyer's Name Phone:				Permit Type:				Zone:			
n/a n/a					Tents					<u> </u>	
Alive Outdoo			un Tour	District /							
			O' Open Tent. Five or Concert Series for ve Thursdays- July 10,						U 2//8	(3)	
Prop	osed Project Description:				1					Lit	
				s					gnature:		
					PEDESTRIAN ACTIVITIES DIST		RICT (P.A.D.)				
					Action: Approved Approved w/Conditions Denied						
					Signature:			ī	Date:		
Permit Taken By: Date Applied For:					Zoning Approval						
gg											
1.	This permit application does not preclude the		Special Zone or Revi		ws Zoning Appeal			Historic Preservation			
	Applicant(s) from meeting Federal Rules.	ng applicable State and	Shoreland		Variance				Not in District or Landmar		
2.	Building permits do not include plumbing, septic or electrical work.			Wetland		Miscellaneous			Does Not Require Review		
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 Zone		Conditional Use			Requires Review		
				Subdivision		Interpretation			Approved		
			Site Plan		Approved		[Approved w/Conditions			
			Maj Minor MM		Denied				Denied		
						Date:			>ate:		
I hav juriso shall	eby certify that I am the over been authorized by the diction. In addition, if a phave the authority to entorports	owner to make this appli permit for work described	med proication a	s his authorized application is is	e prop l agen sued,	t and I agree t I certify that t	o conform the code off	to all app icial's au	licable laws thorized repr	of this esentative	
	permit.										
SIGNATURE OF APPLICANT			ADDRESS			DATE			PHONE		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						DATE			PHONE		