Cit	y of Portland, Maine	e - Build	ling or Use Po	ermit A	Application	P	ermit No:	Issue Dat	e:	CBL:		
389	Congress Street, 0410	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		04-0602			032 R00	4001	
Location of Construction: Owner Nam			Owner Name:			Owner Address:			Phone:			
			Fore & Wharf Llc			6 Webber Way						
Business Name:  Contractor Name Applicant  Lessee/Buyer's Name Phone:						Contractor Address:				Phone		
						Portland						
						Permit Type:				1	Zone:	
					Outdoor Seating							
Past Use: Proposed Use:					-	Permit Fee: Cost of Work:			ork:	CEO District:		
-				lsa /Outdoor seating/		\$75.00			575.00	1		
			add 5 Tables 1:	9		<del></del>		Approved				
								_ Approved			Туре	
							<u>L</u>	Denied		•	• •	
Pro	posed Project Description:	•										
	tdoor seating/ add 5 Table		irs			Signature: Sign			Signatur	nature.		
						PEDESTRIAN ACTIVITIES DISTRIC			U	<u></u>		
						Action: Approved Approved w/Condition Denied					Denied	
						Sign	ature:			Date:		
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval						
	obson		3/2004				Zomie	Approva	.1			
1	This parmit application	doos not	proclude the	Spec	ial Zone or Revi	ews	ws Zoning Appeal			Historic Preservation		
1. This permit application does not preclude the Applicant(s) from meeting applicable State a Federal Rules.				Shoreland			Variance			☐ Not in District or Landm		
2.				☐ Wetland		☐ Miscellaneous			Does Not Require Revie			
<ol> <li>Building permits are void if work is not started within six (6) months of the date of issuance.</li> </ol>			☐ Flood Zon		Conditional Us			Requires Review				
False information may invalidate a building permit and stop all work				Subdivision			☐ Interpretatio			Approved		
			☐ Site Plan  Maj ☐ Minor☐ MM ☐			Approved			Approved w/Condition			
						☐ Denied			☐ Denied			
				Date:			Date:			Date:		
I ha juris shal	reby certify that I am the ve been authorized by the sdiction. In addition, if a Il have the authority to en uch permit.	e owner to permit fo	o make this appli r work described	med procession and the second	as his authorize application is is	ne pro d agei sued,	nt and I agree I certify that the	to conform he code offi	to all ap	plicable laws of thorized repres	of this sentative	
SIGNATURE OF APPLICAN				ADDRESS		S	DA		3	P	НО	

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

<b>Location of Construction:</b>	Owner Name:		Owner Address:	Phone:		
434 Fore St	Fore & Wharf Llc		6 Webber Way			
Business Name:	Contractor Name:		Contractor Address:		Phone	
	Applicant	T	Portland			
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:
			Outdoor Seating			
Dept: Historical Status:	Approved with Condition	ns <b>Reviewer:</b>	Deborah Andrews	Approval Dat	te: 05/	24/2004
Note:	Approved with Condition	ns Reviewer.	Debotan / marews		Ok to Issue	
	'.1 "A 1D ' C	. 1 1 6 0	1 001 114			
1) Outdoor seating must conform 1997copy attached.	with Approved Design S	tandards for Ou	door Care installations	on whari Street	, adopted in	
Dept: Zoning Status: Note:	Approved with Condition	ns <b>Reviewer:</b>	Marge Schmuckal	Approval Dat	te: 05/2	18/2004
<ol> <li>All outdoor seating is subject to</li> </ol>	adjustment at any time fr	om the City's tr	iffic engineer who ensu			
and cleared for pedestrian use.	adjustinent at any time if	on the City's tra	ime engineer who ensur	es that the City s	iuewaik is o	pen
2) This permit is being approved	on the basis of plans subm	itted. Any devi	ations shall require a sep	parate approval b	efore startin	g that
work.  Dept: Building Status:	Pending	Reviewer:	Mike Nugent	Approval Dat	re:	
Note:	Tonding	11011011011	Wilke Tragelle		Ok to Issue	
11010.					OR to Issue	• —
		CERTIFICATIO	N			
I hereby certify that I am the owner I have been authorized by the owner jurisdiction. In addition, if a permit shall have the authority to enter all a to such permit.	of record of the named pro to make this application a for work described in the a	operty, or that the as his authorized application is iss	e proposed work is auth agent and I agree to cor ued, I certify that the coo	form to all appliced all applications and the official's authorized and the official and the official are also all applications are all applications and the official are also all applications are all all applications are all all applications are all all applications are all all all all all all all all all al	cable laws o orized repres	f this entative
SIGNATURE OF APPLICAN		ADDRESS		DATE	PH	Ю
RESPONSIBLE PERSON IN CHARGE	OF WORK, TIT			DATE	PH	HO