City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716						Permit No: 08-0461		Issue Date:		CBL: 032 R007001	
Location of Construction: O		Owner Name:	, , , ,			Owner Address: 101 RICHARDSON ST			Phone:		
Business Name:		Contractor Nan	Contractor Name:		Contractor Address:				Phone		
Lessee/Buyer's Name Phone:		Phone:			Permit Type: Outdoor Seating				Zone:		
Past Use: Restaurant "51 Wharf" 120 sq ft			Proposed Use: Restaurant "51 Wharf" - outside seating 4 Tables & 8 Chairs 120 sq ft					rk: 20.00 INSPEC Use Gr		Туре	
Proposed Project Description: outside seating 4 Tables & 8 Chairs 120 sq ft						Signature: PEDESTRIAN ACTIVITIES DIST		Signature: CRICT (P.A.D.)			
			Action Approved Appro			proved w	_				
Permit Taken By: Date Applied For: 1dobson 05/06/2008					Signature: Date:  Zoning Approval						
1.	This permit application do	-	Spec	Special Zone or Reviews		Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance			Not in District or Landm			
2.	Building permits do not inc septic or electrical work.	g permits do not include plumbing, r electrical work.		☐ Wetland		Miscellaneous			☐ Does Not Require Revie		
3.	•		☐ Flood Zon		Conditional Us			Requires Review			
	False information may inverse permit and stop all work		☐ Su	Subdivision		☐ Interpretatio			Approved		
			Site Plan			Approved			Approved w/Condition		
			Maj Mino MM			Denied		☐ Denied			
			Date:			Date:		D	Date:		
I ha juri sha	ereby certify that I am the ow twe been authorized by the o sdiction. In addition, if a per Il have the authority to enter uch permit.	wner to make this appli rmit for work described	med proication a	as his authorized application is iss	ne prop d agent sued, I	t and I agree t certify that th	o conform t se code offic	o all ap cial's au	plicable laws of thorized repres	of this sentative	
SIC	SNATURE OF APPLICAN			ADDRES	5		DATE	I.	Pl	НО	

Location of Construction:		Owner Name:		Owner Address:		Phone:	
436 FORE ST		OLD PORT RETAIL HOLDINGS LL Contractor Name:		101 RICHARDSON ST  Contractor Address:		Phone	
Business Name:							
Lessee/Buyer's Name		Phone:		Permit Type:		Ze	
				Outdoor Seating			
Dept: Zoning	Status:	Approved	Reviewer	: Marge Schmuckal	Approval Date:	05/0	8/2008
Note:					Ol	k to Issue:	
<b>Dept:</b> Building	Status:	Approved with Conditions	s Reviewer	: Jeanine Bourke	Approval Date:	05/1	4/2008
Note:					Ol	to Issue:	: <b>V</b>
1) The outside dining pe THIS PERMIT MUST		proved for the area delineat WED ANNUALY	ted at the inspe	ection and stated on the p	permit, and must be	kept on si	te.
2) This permit approves	outside se	ating only. Any food, alco	hol or entertai	nment in this space requ	ires licensing appro	vals from	the

3) The tables and chairs must not block any means of egress of any building.

C	nm	m	Δn	te•

5/8/2008-mes: returned to the front staff.

## **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 is 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT	DATE	PHO	