Form # P 04	DISPL	AY	THIS	CAR	D ON	PRINCIP	AL FRO	NTAG	E OF	WOR	Κ	
Please Read Application An Notes, If Any, Attached	d						ECTION			per: 08074	3011)]
This is to certify			: WHARI									
has permission AT <u>42 WHA</u>		eplace	ment of R	ear Egres	airs			032 V015	001			
provided t of the prov the constr this depar	visions o ruction, r	of the	Statu	tes of I	ine a	nd of the fuildings an	ances	s of the	City of	Portla	nd regu	Ilating
Apply to Pu and grade such inform	if nature of				ficatio n and v re this ed or JR NO	n permi ding or	n musi en procu ht therec bsed-in. JIRED.	pr	certificate ocured by g or part th	owner be	efore this	build-
	R REQUIRED											
Fire Dept.												
Health Dept.							- /	7/1	ANA		11	
Appeal Board					_		(·	'ht	VIA.	7	17/28	
Other	Department	Name			-		<u> </u>	~ ~~~ ~	irector - Building	& Inspection for	erviges	
				PENA	LTY FO		IG THIS CA	ARD		,	/	

PENALTY FOR REMOVING THIS CARD

,

Cit	y of Portland, Maine	- Building or Use	Permit	Applicatio	n Pe	rmit No:	Issue Date	:	CBL:	
	Congress Street, 04101	•				08-0742	17/7/	03	032 V0	15001
Loca	tion of Construction:	Owner Name:			Owne	er Address:	-1-1		Phone:	
42 WHARF ST FORE		FORE & WHA	FORE & WHARF LLC		101	RICHARDS	ON ST		207-871-1290	
Business Name: Contra		Contractor Name	Contractor Name:		Conti	ractor Address:			Phone	
		Benchmark			34 1	Thomas Dr. W	estbrook/		20759176	07
Lessee/Buyer's Name Phon		Phone:	Phone:		Permit Type: Alterations - Commercial				Zone: B-3	
Past		Proposed Use:			Perm	nit Fee:	Cost of Wor	·k: C	EO District:	1
Coi	nmercial Restaurant - Oasis	G Commercial R	Commercial Restaurant - Oasis -			\$60.00	\$4,0	00.00	1	
		Replacement of	of Rear E	Egress Stairs	FIRE DEPT:			INSPECT	CTION:	
] Denied	Use Group	"AZ DBC-Ə CILLI	Type: S
									PBC-Э	007
-	osed Project Description:								01 1	H -/-h
Rep	placement of Rear Egress St	tairs		Signature:			Signature CTIVITIES DISTRICT (P.A.D			<u> </u>
					PEDI	ESTRIAN ACTI	VITIES DIS	IRICI (P.A	(.D.)	· / /
					Actio	on: 🗌 Approv	ved Ap	proved w/Co	onditions	Denied
			r—— –		Signa	<u> </u>			Date:	
Permit Taken By:Date Applied For:Imd06/24/2008			Zoning Approval							
1.	This permit application do	bes not preclude the	Spec	ial Zone or Revie	ws	Zonir	ng Appeal		Historic Press	ervation
Applicant(s) from meeting applicable State Federal Rules.		-	Shoreland			Variance			Not in District or Landmark	
 Building permits do not include plumbing, septic or electrical work. 			U Wetland			Miscellaneous		4	T Does Not Require Review	
 Building permits are void if work is not started within six (6) months of the date of issuance. 			Flood Zone			Conditional Use			Requires Review	
False information may invalidate a building permit and stop all work			Subdivision			Interpretation			Approved	
			🗌 Site	e Plan			d] Approved w/0	Conditions
	OF FORTLAND	CITY] Minor [], MM		Denied			Denied 25	
			UK	alcond him	~				1 Inclus	
	01 JU 2002	C	Date: 6	$\frac{1}{2}$, $\frac{1}{2}$, $\frac{1}{2}$		Date:		Date	<u> (0 2% 0</u> =	
	D ANT ISSUED									

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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Bui	ding or Use Permi	t		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: ((207) 87	4-8716	08-0742	06/24/2008	032 V015001
Location of Construction:	Owner Name:			Owner Address:		Phone:
42 WHARF ST	FORE & WHARF LLC			101 RICHARDSO	207-871-1290	
Business Name:	Contractor Name:			Contractor Address:		Phone
	Benchmark			34 Thomas Dr. We	estbrook	(207) 591-7607
Lessee/Buyer's Name	Phone:			Permit Type:		<u> </u>
				Alterations - Com	mercial	
Proposed Use:			Propose	d Project Description:		
Commercial Restaurant - Oasis - Rep	lacement of Rear Egress	s Stairs	Repla	cement of Rear Egre	ess Stairs	
Dept: Historic Status: A	pproved	Re	viewer	Deborah Andrew	s Approval D	ate: 06/28/2008
Note: I spoke w/ Deb no juristiction	n.					Ok to Issue: 🗹
Dept: Zoning Status: A	approved with Condition	ns Re r	viewer	Ann Machado	Approval D	ate: 06/25/2008
Note:						Ok to Issue:
1) This permit is being issued with t	he condition that all the	work wil	ll take p	place within the exis	ting footprint.	
 This permit is being approved on work. 	the basis of plans submi	itted. An	y devia	tions shall require a	separate approval b	efore starting that
Dept: Building Status: A	pproved with Condition	ns Re	viewer	Chris Hanson	Approval D	ate: 06/28/2008
Note:	11					Ok to Issue:
 Permit approved based on the pla noted on plans. 	ns submitted and review	ved w/own	ner/con	tractor, with additio	nal information as a	
2) Frost protection must be installed	per the enclosed detail	as discuss	sed w/o	wner/contractor.		

All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 42	WHARE STREET	PORTLAND
Total Square Footage of Proposed Structur EGRE35 57AVRS	e Square Footage	of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: OLD PORT RETAIL HOLD	Telephone: BAL-1290
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: Benchmark SZE BLZON -	Cost Of Work: \$ 4000- Fee: \$ 5100
Current use: RESZRANT TAVE		
If the location is currently vacant, what wa	s prior use:	
Approximately how long has it been vaca	nt:	
Proposed use: <u>REPLACEMENT</u> Project description:	REAR STAIRS	
Contractor's name, address & telephone: 207 - 799 591-7600 Who should we contact when the permit i Mailing address: SAME 591-76 We will contact you by phone when the p	is ready: DAvić 67.0 мж 207	<u>an</u> Borchusta
review the requirements before starting ar and a \$100.00 fee if any work starts before	ny work, with a Plan Reviewer.	
IF THE REQUIRED INFORMATION IS NOT INCLUDENTED AT THE DISCRETION OF THE BUILDING INFORMATION IN ORDER TO APROVE THIS PE	/PLANNING DEPARTMENT, WE	
I hereby certify that I am the Owner of record of the na have been authorized by the owner to make this appl jurisciction. In addition, if a permit for work described in shall have the authority to enter all areas covered by to this permit.	ication as his/her authorized agent. I n this application is issued, I certify tha	cgree to conform to all applicable laws of this t the Code Official's authorized representative
Signature of applicant: Same (Ife	M Benchunch Do	ate: 6-24-08
This is NOT a permit, you may no If you are in a Historic District you may Planning Depa	ot commence ANY work ay be subject to addition rtment on the 4 th floor of t	al permitting and fees with the



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