City of Portland, Maine - 1	O			Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101 T	el: (207) 874-8703	, Fax: (207) 874-8	, l	2014-00565		034 C001001	
Location of Construction:  49 MARGINAL WAY (63)  BAYSIDE VE		ENTURES LLC 50 PC		Address: DRTLAND PIER STE 400 TLAND, ME 04101		Phone: (207) 518-9670	
Business Name: Contractor I WINXNET NeoKraft patrick@i				actor Address: Main St. Lewist	Phone (207) 782-9654		
Lessee/Buyer's Name	Phone:	Phone:		t Type:	<b>Zone:</b> B7		
Past Use:	Proposed Use:	roposed Use:		it Fee:	CEO District:		
Office Space Office Space		INSPEC		\$168.00 ECTION:		\$0.00 4	
Proposed Project Description:			-				
Install building sign - 3'6" x 19'8	dling - Winxnet						
		PEDEST		ESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
					ed w/Conditions Denied  Date:		
Permit Taken By: Da	Γ	Signature: Date:  Zoning Approval					
bjs		Zoming 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		☐ Varianc	e	Not in District or Landman	
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>		Wetland		Miscella	nneous	Does Not Require Review	
		Flood Zone		Condition	onal Use	Requires Review	
		Subdivision		Interpre	tation	Approved	
	Site Plan		Approve	ed	Approved w/Conditions		
	Maj Minor MM		Denied		Denied		
	Date:		Date:		Date:		
I hereby certify that I am the own I have been authorized by the own jurisdiction. In addition, if a pern shall have the authority to enter a such permit.	ner to make this appl nit for work describe	ication as his autho d in the application	nat the rized a is issu	proposed work i gent and I agree ed, I certify that	to conform to 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