Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

## ECTION

PERMIN

ation

Permit Number: 071250

epting this permit shall comply with all

tures, and of the application on file in

ances of the City of Portland regulating

035 1001001

This is to certify that

CITY OF PORTLAND /National Kidney Foundation

National Kidney Foundation

Ober 28 07 Kit Walk

m or

ine and of the

has permission to \_\_\_\_\_\_356 STATE ST

provided that the person or persons, of the provisions of the Statutes of the construction, maintenance and u

this department.

Apply to Public Works for street line and grade if nature of work requires such information.

N fication inspect in must generally in permit in procuble re this leading or at the reculation of the

of buildings and sa

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. \_\_\_\_\_\_

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

Momash Markly 14/5/07
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

OCT 18 2007

| 727270  Zone:  Zone:  Type: Ter             |  |  |  |
|---------------------------------------------|--|--|--|
| Zone:<br>RdS                                |  |  |  |
| RdS                                         |  |  |  |
| et:                                         |  |  |  |
|                                             |  |  |  |
| Type: Tea                                   |  |  |  |
| Type: Tou                                   |  |  |  |
| Type: To                                    |  |  |  |
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| <b>√</b> 1                                  |  |  |  |
| IBC 2003<br>gnature: Jm 10/15/07            |  |  |  |
|                                             |  |  |  |
| 10/15/07                                    |  |  |  |
| , ,                                         |  |  |  |
| ved w/Conditions Denied                     |  |  |  |
| Date:                                       |  |  |  |
| Zoning Approval                             |  |  |  |
|                                             |  |  |  |
| Preservation                                |  |  |  |
| istrict or Landman                          |  |  |  |
| t Require Review                            |  |  |  |
| Review                                      |  |  |  |
| d                                           |  |  |  |
| d w/Conditions                              |  |  |  |
| Denied                                      |  |  |  |
| 10/15/67                                    |  |  |  |
| Does Not Red Requires Rev Approved Approved |  |  |  |

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

| City of Portland, Maine - Building or Use Permit       Permit No:       Date Applied For:         389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716       07-1250       10/03/2007 |                                  |                  |                      |                                           | CBL: 035 I001001                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|------------------|----------------------|-------------------------------------------|-----------------------------------------------|
| Location of Construction:                                                                                                                                                                            | Owner Name:                      |                  | Owner Address:       |                                           | Phone:                                        |
| 356 STATE ST                                                                                                                                                                                         | CITY OF PORTLAND                 |                  | 389 CONGRESS ST      |                                           |                                               |
| Business Name: Contractor Name:                                                                                                                                                                      |                                  |                  | Contractor Address:  |                                           | Phone                                         |
|                                                                                                                                                                                                      | National Kidney Foundation Maine |                  | PO Box 1134 Portland |                                           | (207) 772-7270                                |
| Lessee/Buyer's Name                                                                                                                                                                                  | Phone: Pe                        |                  | Permit Type:         |                                           | •                                             |
|                                                                                                                                                                                                      |                                  |                  | Tents                |                                           |                                               |
| Proposed Use: Proposed Project Description:                                                                                                                                                          |                                  |                  |                      |                                           |                                               |
| Deering Oaks Park - National Kidney Kidney Walk - 2 tents; one 20' x 30' &                                                                                                                           |                                  |                  | s; one 20' x 30' &   | andation October 28, 200<br>cone 20' x 20 |                                               |
| Dept: Zoning Status: A                                                                                                                                                                               | pproved                          | Review           | er: Ann Machad       | lo <b>Approval I</b>                      | Date: 10/10/2007                              |
| Note:                                                                                                                                                                                                |                                  |                  |                      |                                           | Ok to Issue: 🔽                                |
| Dept: Building Status: A Note:                                                                                                                                                                       | pproved with Condition           | ns <b>Review</b> | er: Tom Markle       | y <b>Approval I</b>                       | <b>Date:</b> 10/15/2007 <b>Ok to Issue:</b> ✓ |
| 1) This permit DOES NOT authorize                                                                                                                                                                    | any construction activi          | ities. The tent  | stage must be ren    | noved at the end of the e                 | event.                                        |
| Application approval based upon i<br>and approrval prior to work.                                                                                                                                    | information provided by          | y applicant. A   | ny deviation from    | approved plans require                    | s separate review                             |

## **Comments:**

10/10/2007-amachado: Gave back to Lannie. She is calling about the certificate of flamibility.