City of Portland, Maine - Building or Use Permit Applicatio					Permit No:	Issue Date	:	CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703				- 1	03-1096			036 G00	01001
Location of Construction:	Owner Name:	Owner Name:		Dwner Address:			Phone:		
2 Park Ave	Brown C N Co	Brown C N Company		Po Box 200 🔮			207-743-9212		
Business Name:	Contractor Name	Contractor Name:		Contractor Add			UL M	Phone	
n/a	C N Brown Co	C N Brown Company		PO Box 200 South Paris		- 6.00		2077439212	
Lessee/Buyer's Name	Phone:	Phone:					Zone:		
n/a n/a									BZB
Past Use:	Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:		k:	CEO District:		
Commercial / Convenience St		Convenience Store / Ir			\$165.00	\$16,000.00		2	ļ
		canvas awning around canopy		Appioved			INSPEC	PECTION:	
	fascia and rem	fascia and remove existing.		Denied Use C			Use Gro	AWNN C Type: NA	
					<u> </u>			AWNIN	/ /
								10 G	22/05
								A.N	· I
					0		Signatu	- /- / /	
					PEDESTRIAN ACTIVITIES DISTRICT (P.A			P.A.D.) (24
				A	ction: Approv	ed 🗌 App	oroved w/	Conditions	Denied
			Signa		gnature:			Date:	
Permit Taken By:	Date Applied For:		Zoning Approv				ıl		
gg	09/05/2003								
		Special Zone or Review		ews Zoning Appeal			Historic Preservation		
		Shoreland		Variance			Not in District or Landmar		
				Miscellaneous			Does Not Require Review		
			Flood Zone		Conditional Use			Requires Review	
		Subdivision			Interpretation			Approved	
		Site Plan			Approved			Approved w/Conditions	
				Denied			Denied		
		Date:	9/10/0	5	Date:		Da	ate:	2

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

2/17/04 wyliad Al