

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1797	Issue Date:	CBL: 037 C016001
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Location of Construction: 551 CONGRESS ST	Owner Name: 551 CONGRESS STREET LLC	Owner Address: PO BOX 6799	Phone:
Business Name:	Contractor Name: W H Demmons	Contractor Address: 93 Warren Ave Portland	Phone 2077977468
Lessee/Buyer's Name	Phone:	Permit Type: Hood Systems, Commerical	Zone:

Past Use: Commercial/ Tapa Bar	Proposed Use: White Heart Lounge/ install hood in kitchen connected w/ permit#051626	Permit Fee: \$129.00	Cost of Work: \$11,920.00	CEO District: 1
Proposed Project Description: White Heart Lounge/ install hood in kitchen connected w/ permit#051626		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature: Date:				

Permit Taken By: ldobson	Date Applied For: 12/13/2005	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landma
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Revie
<input type="checkbox"/> Flood Zon	<input type="checkbox"/> Conditional Us	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretatio	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Condition
Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date:	Date:	Date:

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

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Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 03/16/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Fire	Status: Approved with Conditions	Reviewer: Cptn Greg Cass	Approval Date: 12/15/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Install and design to comply with NFPA 96			

Comments:
12/16/2005-mjn: Spoke with David Lloyd...need wholistic HVAC plans w/LXS info.

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