

Location/Address: '

Sign Permit Application

If you or the property owner owes real estate or personal property taxes or any other charges on any property within the City, payment arrangement MUST be made before permits are accepted.

551 Congress

Tax Assessor's Chart/Block/Lot (CBL) OWNER Name/Address:	Telephone:
Chart: 37 Block: C Lot: 16 551 Congress street 16	E-Mail: Tmoulton @dunham-gra
10 Days St. Sufe	400
LEASEE/BUYER Name (if Applicable) CONTRACTOR name, address/phone	Total S.F. signage \$
	(SF= x .20 for sidewalk)
	Sign Fee: \$25
	(Sidewalk=\$25)
Square Foot (SF) fee + Sign Fee =	TOTAL FEE: \$
Square Foot (SF) fee + Sign Fee = Who should we contact when the permit is ready: Name: And martin Address 496 (Angress St. Saide 3 Polymand, Me	Phone: 207 - 653 - 3527
Address 496 GAGGESS St Said 3 Polyment of	Otto F-Mail gragation Q unific
nuuros / 10	Parte Ny Car
Tenant/allocated building space frontage (in feet): Length:	Height:
Lot frontage (in feet): Single Tenant or Multi-Tenant Lot:	
2001 2001 1 / Para	Malti Pythose Sin
Current Property Specific Use: Nosh - Rest garant / Garking	40+
If vacant, what was prior use:	
Proposed Use:	
Information on proposed sign(s)	e "
Freestanding sidewalk sign? YES NO Dimensions proposed:	(sf); Height from grade: 44 sf
	inners in leasted MIJOT be mustided
A site sketch and building sketch showing exactly where existing and proposed si Sketches and/or pictures of proposed signage and existing buildi	
Please submit all information outlined in the Sign/Awning Application Checklist. Failure t	to do so may result in the denial of your permi
In order to be sure the City fully understands the full scope of the project, the Planning and Devel	opment Department may request additional
information prior to the issuance of a permit. For further information, visit us on-line at <u>WWW.P</u>	
Inspections Office, room 315 City Hall, or call 207-874-8703.	
I hereby certify I am the Owner of record of the named property, or that the owner of record autho	orizes the proposed work and that I have been
authorized by the owner to make this application as his/her authorized agent. I agree to conform	
addition, if a permit for work described in this application is issued, I certify that the Code Officia	
authority to enter all areas covered by this permit at any reasonable hour to enforce the provision	as of the codes applicable to this permit.
Signature of Applicant: Wy D. Or	Date: 10/24/16