

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

Permit No: 05-0961	Issue Date:	CBL: 037 D002001
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Location of Construction: 511 CONGRESS ST	Owner Name: SPRING STREET LIMITED PARTN	Owner Address: 317 GLEN RD	Phone:
Business Name:	Contractor Name: DMC Permits	Contractor Address: 4 Velma Rd Randolph,	Phone 7819630570
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone:

Past Use: Commercial	Proposed Use: Commercial 6 sf illuminated sign	Permit Fee: \$42.00	Cost of Work: \$42.00	CEO District: 1
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Proposed Project Description: 6 sf illuminated sign	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: _____	INSPECTION: Use Group: Type 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: dmartin	Date Applied For: 07/07/2005	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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: _____	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied Date: _____
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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: PAD	Status: Approved	Reviewer: Deborah Andrews	Approval Date: 07/21/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Historical	Status: Not Applicable	Reviewer: Deborah Andrews	Approval Date: 07/21/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 07/20/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Tammy Munson	Approval Date: 08/03/2005
Note:			Ok to Issue: <input checked="" type="checkbox"/>

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DATE

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