City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: Permit No: 593 Congress Annamarie Trusiani 781-4494 Phone: Owner Address: Lessee/Buyer's Name: BusinessName: 4 Brown St., Falmouth Foreside The Kitchen/Christos Zoulamis 775-0833 Permit Issued SSUE Phone: Contractor Name: Address: **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: \$ \$30,20 **FIRE DEPT.** □ Approved INSPECTION: Same w/signage Restaurant ☐ Denied Use Group: Type: Signature: Zoning Approva Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Approved with Conditions: Erect signage as per attached ☐ Shoreland \Box □ Wetland (2 signs - 8' x 2'8" and 2' dia) ☑ Flood Zone ☐ Subdivision Signature: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: 2/26/97 Vicki Dover **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-□ Interpretation 3. □ Approved tion may invalidate a building permit and stop all work... □ Denied Historic Preservation □ Not in District or Landmark □ Does Not Require Review ☑ Requires Review Call 775-0833 for P/U Action: **□** Appoved CERTIFICATION Approved with Conditions 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 □ Denied 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 provisions of the code(s) applicable to such permit

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

DATE:

PHONE:

PHONE:

CEO DISTR

ADDRESS:

Oreg Zoula**m**is

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

SIGNATURE OF APPLICA