City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 **Location of Construction:** Permit No: 🧿 🦻 Owner: Phone: 594 Congress Street Matt Orin 236-0909 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: SAA Starbucks Coffee Permit Issued: Contractor Name: Address: Phone: ***Neokraft Signs 686 Main Street Lewiston, ME 04240 1800-339-2258 **COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: \$ 705.00 \$ 31.12 Coffee Shop Coffee Shop **FIRE DEPT.** □ Approved INSPECTION: Use Group: 43 Type: 3 0 ☐ Denied BOCA 96 Zone: CBL: 037-G-001 Signature: Signature: - The Zonina Approvat Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (PA.D.) $10 \times 13 - 6$ 2' Circular Signs Action: Approved Install 5 Signs Special Zone or Reviews Approved with Conditions: 18" Circular Sign ☐ Shoreland Denied □ Wetland ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan mai ☐minor ☐mm ☐ Permit Taken By: Date Applied For: ub 3-24-99 **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 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation tion may invalidate a building permit and stop all work.. ☐ Approved WITH REQUIREMENTS ☐ Denied **Historic Preservation** □ Not in District or Landmark □ Des Not Require Review Requires Review Action: CERTIFICATION Appoved 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 ☐ Approved with Conditions 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, □ Denied 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 3-24-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE: CEO DISTRICT