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

Location of Construction: Owner:		Phone:		Permit No: O O O O C
486 Congress Street	Donna Barthe			Permit No: 99026 8
Owner Address: 361 US Route 1	Lessee/Buyer's Name: Robert Whisenant	Phone: Busines 774–5766	ssName:	PERMIT ISSUED
Contractor Name: Address: Phone:		Permt Issued:		
Past Use:	Proposed Use:	COST OF WORK: \$ 100.00	PERMIT FEE: \$ 25.00	NNR 2 9 1999
Restaurant	Same	FIRE DEPT. Approved	INSPECTION:	CITY OF PORTLAND
		Denied	Use Group: A3 Type: 313.	Zone:- CBL: 037-I-005
Proposed Project Description:		Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (PAD.)		Zoning Approval: 3/20 00
Interior renovations to include removal of wall to access bathroom.		Action: Approved UU Approved with Conditions: Denied		Special Zone or Reviews:
		Signature:	Date:	□ Flood Zone □ Subdivision
Permit Taken By:	Date Applied For:			□ Site Plan maj □minor □mm □
SP		3-26-99		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance □ Miscellaneous
2. 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 information may invalidate a building permit and stop all work 				□ Interpretation □ Approved □ Denied
WITH REQUIREMENTS				Historic Preservation Not in District or Landmark Does Not Require Review Requires Review Action: NeedSfeven
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 provisions of the code(s) applicable to such permit				Appoved Approved with Conditions Denied
3-26-99				
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE		PHONE:	
WhitePermit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector				