Cit	y of Portland, Main	e - Build	ling or Use Pe	ermit A	Application	P	ermit No:	Issue Dat	e:	CBL:		
389	Congress Street, 0410	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		05-1142			037 100	7001	
Location of Construction: Owner Name:						Owr	Owner Address:			Phone:		
			Old Port Holdin	Old Port Holding Co Llc			7 Portsmouth A	ve				
Business Name:			Contractor Name:			Contractor Address:			Phone			
Lessee/Buyer's Name			Phone:		Permit Type: Tents				Zone:			
Post Hass			Proposed Use:			Permit Fee: Cost of Work:		rk·	CEO District:	<del>†</del>		
Parking Lot			-	ent for special event		\$30.00			30.00			
			for Margaritas Mexican Rest. Block party Set up 08/20/2005 break down 08/20/2005		FIRE DEPT: Approved INS		INSPE	SPECTION: se Group: Type				
Pro	posed Project Description	:										
	nt for special event for M		Mexican Rest. B	lock pa	rty Set up	Signature: Sig			Signat	onature:		
	20/2005 break down 08/20					PEDESTRIAN ACTIVITIES DISTRIC						
									proved v	w/Condition Denied		
						Sign	nature:			Date:		
Peri	mit Taken By:	Date A	pplied For:			Zoning Approval			1			
tmm 08/16/2005			/2005				Zomig					
1.	This permit application	preclude the	Spec	Special Zone or Reviews		Zoning Appeal			Historic Preservation			
Applicant(s) from meeting applicable Sta Federal Rules.			•	Shoreland			☐ Variance			☐ Not in District or Landma		
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			☐ Does Not Require Revie			
3.	3. Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flood Zon			☐ Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work				Subdivision			☐ Interpretatio			Approved		
			☐ Site Plan  Maj ☐ Minor☐ MM ☐			☐ Approved ☐ Denied			☐ Approved w/Condition ☐ Denied			
				Date:			Date:		Г	Date:		
I ha juris shal	reby certify that I am the we been authorized by th sdiction. In addition, if a Il have the authority to en uch permit.	e owner to permit for	o make this appli r work described	med procation a	as his authorized application is is	ne prod d age sued,	nt and I agree I certify that the	to conform ne code offi	to all ap	pplicable laws of the state of	of this sentative	
SIG	GNATURE OF APPLICAN				ADDRES	S		DATI	Ξ	P	НО	

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction:	Owner Name:	Owner Address:	Phone:
7 Brown St	Old Port Holding Co Ll	c 655 Portsmouth Ave	
Business Name:	Contractor Name:	Contractor Address:	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Tents	Zone:
Dept: Zoning Note:	Status: Approved	Reviewer: Tammy Munson	Approval Date: 08/17/2005 Ok to Issue: ✓
Dept: Building Note:	Status: Approved with Condition	s Reviewer: Tammy Munson	Approval Date: 08/17/2005 Ok to Issue: ✓
	OT authorize any construction activi	ties. The tent must be removed at the e	

## **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