			PERMIT	ISSUED			
City of Portland, Maine	_		1 0010000	Date	CBL:	001	
389 Congress Street, 04101		, Fax: (207) 874-871	" L MAV	5 2002	038 C0140	J01	
Location of Construction:			Owner Address: P.O. Box 1047		Phone:		
8 Cotton St Business Name:		Jordan, Mark Contractor Name:		MOTINA	883-9051 Phone	 	
The Signery			Contractor Address: 299 Forest Avenue Portland		2078797700		
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:		
			Signs - Permanent		17-3		
Past Use:	Proposed Use:		Permit Fee: Cos	t of Work:	CEO District:		
Restaurant/Cantina	Restaurant/Ca	ntina	\$30.00	\$62.00	1		
			FIRE DEPT: Ap	proved	ECTION:		
			/ ///De	lice (Group: <i>U</i> Ту	ype: SiJ	
			1/1/		SOLA KA	00	
					DUM II	//	
					301A 11		
			Signature: / PEDESTRIAN ACTIVITI	FS DISTRICT	(PAD)		
			Action: Approved Approved		à		
					w/Conditions Denied		
_			Signature:	<i>v / //</i>	Date:		
Permit Taken By:	Date Applied For: 04/18/2002		Zoning Approval				
		Special Zone or Revie	ws Zoning A	ppeal	Historic Preserv	ation	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland	Variance		Not in District or	· I andmark	
		Siniciani	[] Varidia.		1 100 21 22 Canadian		
2. Building permits do not include plumbing,		Wetland	Miscellaneous		Does Not Require Review		
septic or electrical work.							
3. Building permits are void if work is not started		Flood Zone	Conditional Use		Requires Review		
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work		Contration of the contract of		Interpretation		Approved	
		Subdivision Interpretation			Approved		
.		Site Plan	Approved		[_] Approved w/Con	ditions	
		Maj, Minor MM	Denied	Denied		67	
		01			to D.A 4/30/0		
		Date: 4 30 0	V Date:		Date:	1	
					DN 8/1	0100	
					ſ		
		CERTIFICATI	ON				
I hereby certify that I am the ov	wner of record of the na	amed property, or that	the proposed work is au	thorized by t	the owner of record	1 and	
that I have been authorized by t						aws of	
this jurisdiction. In addition, if representative shall have the au						the	
code(s) applicable to such perm		as covered by such peri	int at any reasonable no	our to cilloic	e are provision of t	шс	
code 31 applicable to such perm							
code s) applicable to such permi							

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

8/4/04 Cloud