City of Portland, Maine - Bui	O			Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703 Owner Name:	, Fax: (207) 874-8		2013-02277		039 A017001	
Location of Construction: 128 HIGH ST	OUTHERN NC	Owner Address: ONE CONGRESS SQ PORTLAND, ME 04101		Phone: D,			
Business Name:	Contractor Name:		Contractor Address:			Phone	
United Way	Dube Signs / N	Dube Signs / Mark		Shaker Road Gi	(207) 657-4551		
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:	
Erica Paradis Past Use:	(207) 874-1000 Proposed Use:		Signs, Banners and Awnings Permit Fee: Cost of Work:			B3	
_		WCSH 6		\$0.00 ECTION:	Cost of Work:	\$0.00 CEO District:	
			INSP	ection:			
Proposed Project Description:	N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	11 G : 121					
Install temporary banner for the 2013	ill Campaign - 12' x	STRIAN ACTIVI	IAN ACTIVITIES DISTRICT (P.A.D.)				
		Action: Approved Approved w/C			ed w/Conditions Denied		
D 4/10 D		ı	S	ignature:		Date:	
-	Date Applied For: 10/07/2013			Zoning Approval			
This permit application does not preclude the		Special Zone or Ro	eviews	Zoni	ng Appeal	Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Varianc	ee	Not in District or Landmar	
 Building permits do not include plumbing, septic or electrical work. 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 		Wetland		Miscell	aneous	☐ Does Not Require Review	
		Flood Zone		Condition	Conditional Use Requires Review		
		Subdivision		Interpre	☐ Interpretation ☐ App		
	Site Plan		Approv	ed	Approved w/Conditions		
	Maj Minor MM		☐ Denied		Denied		
		Date:		Date:		Date:	
I hereby certify that I am the owner of I have been authorized by the owner jurisdiction. In addition, if a permit f shall have the authority to enter all ar such permit.	to make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify that	e to conform to t the code offici	all applicable laws of this al's authorized representative	
SIGNATURE OF APPLICANT		ADDF	RESS		DATE	PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE