Location of Construction: Owner: Phone: Permit No: Q 117 Spring St ROT ASSOCIATES **Owner** Address: Lessee/Buyer's Name: Phone: BusinessName: PFRMIT 271-9164 The Associacue, ive. Som white Permit Issued: Chr La Phone: Contractor Name: Address: DFC 17 **COST OF WORK: PERMIT FEE:** Past Use: Proposed Use: \$ \$ XE.SQ 5.60 **CITY OF PORTLAN INSPECTION:** FIRE DEPT. Approved Bar/Restaurate Sagar □ Denied Use Group: Type: CBL: Zone: (1Sun port S. B 1. Signature: Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) 17% Approved Action: **Special Zone or Reviews** Approved with Conditions: Erec. Signate □ Shoreland Denied U Wetland Elood Zone □ Subdivision Signature: Date: Site Plan mai Dminor Dmm D Permit Taken By: Date Applied For: HUT & WERSIN 11 December 199" Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. 1. □ Miscellaneous 2 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 □ Approved tion may invalidate a building permit and stop all work.. Denied PERMIT ISSUED WITH REQUIREMENTS **Historic Preservation** □ Not in District or Landmark Does Not Require Review ERequires Review Action: CERTIFICATION Appoved Approved with Conditions 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 Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit (1 December 1997 €... ADDRESS: SIGNATURE OF APPLICANT Stephen Mariace DATE: PHONE: **RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE** PHONE: **CEO DISTRICT** White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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