

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 2014-01881	Issue Date:	CBL: 039 A037001
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Location of Construction: 106 HIGH ST	Owner Name: THIDWICK LLC	Owner Address: BOX 411 100 COMMERCIAL ST PORTLAND, ME 04101	Phone:
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Business Name: Little Tap House

Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	Zone: B3
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Past Use: 1st floor restaurant/bar. 2nd floor all artist studios. 3rd floor dance lessons studio.	Proposed Use: Same: First Floor Restaurant/Bar; Second Floor all Artist Studios; and Third Floor Dance Lessons Studio.	Permit Fee: \$560.00	Cost of Work: \$0.00	CEO District: 3
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Proposed Project Description: 2014 OUTSIDE DINING RENEWAL for Little Tap House: Five (5) Tables and Fifteen (15) Chairs: 4' x 60' (240 SF).

INSPECTION:

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied
Signature: _____ Date: _____

Permit Taken By: dmc	Date Applied For: 08/21/2014	Zoning Approval		
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<ol style="list-style-type: none"> 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: _____	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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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 APPLICANT ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE