

City of Portland, Maine - Building or Use Permit Application

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

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| Permit No: 10-0332 | Issue Date: | CBL: 040 D001001 |
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| Location of Construction: 20 Danforth St | Owner Name: Brown J B & Sons | Owner Address: Po Box 207 | Phone: 207-774-5908 |
| Business Name: Portland Velocipede | Contractor Name: Welch Stencil | Contractor Address: 7 Glasgow Road Scarborough | Phone: 2078836200 |
| Lessee/Buyer's Name | Phone: | Permit Type: Signs - Permanent | Zone: |

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|--|---|---|--|---------------------------|
| Past Use: Commercial / retail - "Addo Novo" | Proposed Use: Bicycle Shop / Erect 2' x 4' banner and install 9 sq. ft. attached building sign. | Permit Fee: \$99.00 | Cost of Work: \$0.00 | CEO District: 1 |
| Proposed Project Description: Erect 2' x 4' banner and install 9 sq. ft. attached building sign. | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: Type: | |
| | | Signature: | Signature: | |
| PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) | | | | |
| Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied | | | | |
| | | Signature: | Date: | |

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|---|--|---|---|---|
| Permit Taken By: gg | Date Applied For: 04/05/2010 | Zoning Approval | | |
| <ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 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.. | | 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: |

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 |

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Dept: Historic **Status:** Approved with Conditions **Reviewer:** Deborah Andrews **Approval Date:** 04/07/2010
Note: **Ok to Issue:**

1) The size of the lettering must correspond generally to that of the adjacent signs.

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 04/07/2010
Note: **Ok to Issue:**

1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 04/14/2010
Note: **Ok to Issue:**

1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.

Comments:

4/7/2010-amachado: Spoke to Josh Cridler. He will get manufacturer to fax certificate of flammability.

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SIGNATURE OF APPLICANT

ADDRESS

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

DATE

PHONE