City of Portland, Maine - Build	ding or Use	Permit Applicat	ion	Permit No:	Issue Date:	CBL:		
389 Congress Street, 04101 Tel: (2	0			2014-01367		044	F004001	
Location of Construction:	<u> </u>		r Address:	- !	Phone:	Phone:		
09 DANFORTH ST VICTORIA S MAINE WON				DANFORTH ST PORTLAND, 04101		,		
Business Name:			1					
Victoria Mansion								
Lessee/Buyer's Name Phone:		Permit		t Type:		Zone:	Zone:	
Greg Sundik (207) 450-		9	Tents			R6		
Past Use:	Proposed Use:		Permit Fee: Cost of Work:		СЕОГ	CEO District:		
Historic Single Family Museum	Same: Historic Single Family					80.00	0.00 3	
Museum  Proposed Project Description:			INSPI	ECTION:				
Tent event for 7/7/14-7/14/14 (breakd								
Tent event for 7/7/14-7/14/14 (bleaku		PEDESTRIAN ACTIVITIES DISTRICT (		P.A.D.)				
					ed w/Conditions	Denied		
	Signature:			Date:				
	ken By: Date Applied For: 06/23/2014			Zoning Approval				
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation	
		Shoreland		☐ Varianc	riance		District or Landmar	
2. Building permits do not include presentic or electrical work.	☐ Wetland		Miscella	aneous	Does No	ot Require Review		
3. Building permits are void if work within six (6) months of the date	of issuance.	Flood Zone		Condition	Conditional Use		Requires Review	
False information may invalidate permit and stop all work	a building	Subdivision		Interpre	Interpretation		Approved	
	Site Plan		Approv	Approved		Approved w/Conditions		
	Maj Minor MM		☐ Denied	☐ Denied		Denied		
	Date:		Date:	Date:		Date:		
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit fo shall have the authority to enter all are such permit.	o make this appl or work describe	ication as his authored in the application	at the rized a is issu	proposed work gent and I agree ed, I certify that	to conform to a t the code official	all applicable al's authorized	laws of this d representative	
SIGNATURE OF APPLICANT		ADDRESS			DATE		PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE