

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 2014-01286	Issue Date:	CBL: 045 A035001
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Location of Construction: 670 CONGRESS ST (One Longfellow)	Owner Name: LONGFELLOW SQUARE PARTNERS LLC - Anne Bilodeau	Owner Address: 104 GRANT ST PORTLAND, ME 04101	Phone: (207) 874-8656
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Business Name: Center for Cultural Exchange

Lessee/Buyer's Name Anne Bilodeau	Phone: (207) 874-8656	Permit Type: Outdoor Seating	Zone: B3
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Past Use: 1st floor and 2nd floor front = theater/assembly uses - 2nd floor rear and 3rd floor = offices	Proposed Use: Same: 1st floor and 2nd floor front = theater/assembly uses - 2nd floor rear and 3rd floor = offices	Permit Fee: \$80.00	Cost of Work: \$0.00	CEO District: 3
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Proposed Project Description: Outside Dining on public property - 7 Tables and 28 Chairs - 6' x 20" & 5' x 24' - 240 sf total

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: Idobson	Date Applied For: 06/12/2014	Zoning Approval		
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<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: _____
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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