Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application	I	Permit No:	Issue Dat	e:	CBL:	
	Congress Street, 04101		O				05-1573			046 C01	1001
Location of Construction: Owner Name:				. ,		Ow	Owner Address:			Phone:	
675 CONGRESS ST DOUKAS WIL				LIAM B		195 STATE ST					
Bus	iness Name:	Contractor Nan	ne:		Con	tractor Addres	s:		Phone		
			Sign A Rama	Sign A Rama			245 US Route 1 Scarborough			207883007	' 5
Less	see/Buyer's Name		Phone:			Permit Type:				Zone:	
						Signs - Permanent					
Past	t Use:		Proposed Use:			Permit Fee: C		Cost of Wo	Cost of Work:		
	staurant			nendment to permit					\$0.00	2	
Restaurant				ge awning color and		FIRE DEPT:			·	CTION:	
			design of sign			L		_ Approved	Use G		Type
								Denied		1	71
Pro	posed Project Description:					_					
	nendment to permit #0514		e awning color a	nd desi	on of sion	Signature:		Signature:			
	remainent to permit #0311) Tonang	,e awning color c	ind design of sign		PEDESTRIAN ACTIVITIES DISTRIC			-		
									,	,	
						Action: Approved Approved				d w/Condition Denied	
						Sig	nature:			Date:	
Peri	mit Taken By:	Date A	pplied For:						1		
	obson		/2005			Zoning Approval					
			nraeluda tha	Special Zone or Review		iews	S Zoning Appeal			Historic Preservation	
1.	Applicant(s) from meeti		Shoreland			☐ Variance			☐ Not in District or Landn		
	Federal Rules.				auto State and	v arrance			1 Not in District of Landin		
2		م ماییدام س	lumbina santia	Wetland			Miscellaneous			☐ Does Not Require Revie	
 Building permits do not include plumbing, septic or electrical work. 			wettand			Miscentineous			Boes two require revie		
2	Building permits are voi	d if work	is not started	Flood Zon			Conditional Us			Requires Review	
3.	- 1			Li Piood Zoli			Conditional Os			requires review	
within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work				Subdivision			☐ Interpretatio			Approved	
				Site Plan		Approved			Approved w/Condition		
							Птррготоц			Tipproved w/Condition	
				Maj ☐ Minor☐ MM☐		П	☐ Denied			☐ Denied	
						`Ш					
				Doto	Date:		Date:		L	Date:	
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	reby certify that I am the										
	ve been authorized by the sdiction. In addition, if a p					_	_		_	_	
	Il have the authority to en										
	uch permit.	un un	.a.s co relea by si	per	at any roase		- 110 st to CIII OI	to the prov	151011 0	e code(s) ap	riicuoic
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~-:	NATURE OF THE STATE OF THE STAT					<i>a</i>					
SIG	SNATURE OF APPLICAN				ADDRES	S		DATI	Ė	Pl	НО

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction: Owner Name:		Owner Address:	Phone:	
675 CONGRESS ST	DOUKAS WILLIAM B	195 STATE ST		
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Sign A Rama	245 US Route 1 Scarborough	2078830075	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
		Signs - Permanent		

11/02/2005 Dept: Historical **Status:** Approved with Conditions Reviewer: Deborah Andrews **Approval Date:** Ok to Issue: ✓ Note: 1) side awning and sign to be removed. Status: Approved Reviewer: Ann Machado **Approval Date:** 10/28/2005 Dept: Zoning Ok to Issue: ✓ Note: **Reviewer:** Tammy Munson Dept: **Building Status:** Approved with Conditions **Approval Date:** 11/02/2005 Ok to Issue: Note: 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

Comments:

10/27/05-ldobson: Fees on already submitted sign permit. Fees owed were a equal LJD

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 APPLICAN	ADDRESS	DATE	PHO	
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО	