	y of Portland, Mai Congress Street, 04		0			ŀ	05-1511	Issue Dat	e:	047 A01	13001
Location of Construction: Owner Name				(2017) 011 0110		Owner Address:		Phone:			
795 CONGRESS ST			STONE SOUP FOODS			PO BOX 1459					
Bus	iness Name:		Contractor Name:			Contractor Address:			Phone		
		Flynn-z Co	<u> </u>			P O Box 2353 Scarborough			207833030	1	
Less	see/Buyer's Name	Phone:	one:		Permit Type: Alterations - Commercial				Zone:		
Past Use: Proposed Use:										CEO District:	
Commercial				ild and plumb bar,		\$201.00		\$20,0	20,000.00 2		
			repair back wall and roof		FIRE DEPT:		Approved		CTION:	_	
								Denied	Use Gro	oup:	Type
Pro	posed Project Descripti	on:									
Build and plumb bar, repair back wall and roof							Signature:		Signature:		
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (P	CT ( <b>P.A.D.</b> )	
						Act	tion Approx	ed App	proved w/	Condition	Denied
						Sig	nature:			Date:	
Permit Taken By: Date Applied For:					Zoning Approval						
dn	nartin	10/11	/2005			Zomig Approva					
1.	This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		preclude the	Special Zone or Review		ews	S Zoning Appeal			Historic Preservation	
			eable State and	Shoreland		☐ Variance		☐ Not in District or Landr			
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous		☐ Does Not Require Revie			
3.	•			Flood Zon		Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work			a building	Subdivision			☐ Interpretatio		[	Approved	
				☐ Si	te Plan		Approve	ed	[	Approved w	/Condition
			Maj Mino MM			☐ Denied			☐ Denied		
				Date:			Date:		Da	ite:	
I ha juri: shal	reby certify that I am to the land to the	the owner to f a permit fo	o make this appli r work described	med procation a	as his authorized application is iss	ne pr l age	ent and I agree t , I certify that th	o conform t se code offic	o all app cial's aut	plicable laws of horized repres	of this sentative
SIC	SNATURE OF APPLICAN	1			ADDRESS	<u> </u>		DATE	<u> </u>	Pi	НО
										•	-

Location of Construct	ion: Owner Name:	Own	er Address:	Phone:
795 CONGRESS ST	STONE SOUP FO	ODS PO	BOX 1459	
Business Name:	Contractor Name:	Cont	tractor Address:	Phone
	Flynn-z Co	PO	Box 2353 Scarborough	2078330306
Lessee/Buyer's Name	Phone:	Pern	nit Type:	Zone:
		Alt	terations - Commercial	
<b>Dept:</b> Zoning	Status: Approved	Reviewer: M	Iarge Schmuckal Approv	val Date: 10/26/200
<b>Note:</b> 10/26/05 see	e copy of explanation of what the use	a ice mastaument mat a han	This is not a shange of use Co	tone Ok to Issue: 🗹
<b>Dept:</b> Building	Status: Approved with Cond	ditions Reviewer: M	like Nugent Approv	val Date: 11/01/200
Dept: Building Note:	Status: Approved with Cond	ditions <b>Reviewer:</b> M	Tike Nugent Approv	val Date: 11/01/200. Ok to Issue: ☑
Note:	Status: Approved with Conceptual of the Conceptu			
Note: 1) All Kitchen equip		uipment is covered by thi		<u></u>
Note: 1) All Kitchen equip 2) The walls are to be	pment is existing no new Exhaust eq be 3 5/8 metal studs 16" O.C. W/ 5/8	uipment is covered by thi " drywall	s permit.	Ok to Issue: 🗹
Note: 1) All Kitchen equip 2) The walls are to b  Dept: Fire	pment is existing no new Exhaust eq	uipment is covered by thi " drywall	s permit.	Ok to Issue:
Note: 1) All Kitchen equip 2) The walls are to be	pment is existing no new Exhaust eq be 3 5/8 metal studs 16" O.C. W/ 5/8	uipment is covered by thi " drywall	s permit.	Ok to Issue: 🔽
Note: 1) All Kitchen equip 2) The walls are to b  Dept: Fire  Note: 1) Entire building to	pment is existing no new Exhaust eque 3 5/8 metal studs 16" O.C. W/ 5/8  Status: Approved with Conductor comply with NFPA 101	uipment is covered by thi " drywall	s permit.	Ok to Issue:
Note: 1) All Kitchen equip 2) The walls are to b  Dept: Fire  Note: 1) Entire building to	pment is existing no new Exhaust eque 3 5/8 metal studs 16" O.C. W/ 5/8  Status: Approved with Cond	uipment is covered by thi " drywall	s permit.	Ok to Issue:

## **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	РНО
DECDONGIDI E DEDCON IN CHARCE OF WORK TIT		DATE	DITO