



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Address/ Location of Construction: 767 CONGRESS ST.		
Total Square Footage of Proposed Structure:		8,769 S.F. (TOTAL EXISTING BLDG. S.F.)
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant Name: 2A ARCHITECTS Address: AMANDA AUSTIN PO BOX 189 City, State & Zip: ROCKPORT, ME 04856	Telephone: 207-236-6545 Email: APA@2AARCH.COM
047 A017001		
Lessee/Owner Name: (if different than applicant) QUIMBY COLONY Address: PO BOX 445 City, State & Zip: PORTLAND, ME 04112 Telephone & E-mail:	Contractor Name: (if different from Applicant) Address: WOOD LAB JOB SEVENTH City, State & Zip: 193 PRESUMSCOT ST. PORTLAND, ME 04103 Telephone & E-mail:	Cost Of Work: \$ 67,000 C of O Fee: \$ _____ Historic Rev \$ _____ Total Fees : \$ _____
Current use (i.e. single family) ASSEMBLY (RESTAURANT), OFFICE, APARTMENT If vacant, what was the previous use? 2ND FLOOR VACANT, PREVIOUSLY A RESTAURANT Proposed Specific use: SAME AS CURRENT USES ON 3RD/4TH FLOORS Is property part of a subdivision? NO If yes, please name _____ Project description: 2ND FLOOR FUTURE USE AS ASSEMBLY (RESTAURANT/ FOOD RELATED USE). ADA RESTROOM 2ND FLOOR - RATED SEPARATION AND IMPROVEMENTS TO EXPRESS FROM UPPER FLOORS		
Who should we contact when the permit is ready: APPLICANT, AMANDA P. AUSTIN		
Address: P.O. BOX 189		
City, State & Zip: ROCKPORT, ME 04856		
E-mail Address: APA@2AARCH.COM		
Telephone: 207-236-6545		

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial. **APPLICABLE INFORMATION HAS BEEN PROVIDED IN DRAWINGS.**

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/ her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature:  Date: **6/10/15**

This is not a permit; you may not commence ANY work until the permit is issued.