## City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel; (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: Casco Bay Eye 770 Congress Street 001112 Lessee/Buyer's Name: Owner Address: Phone: BusinessName: SAA Permit Issued: Contractor Name: Address: Phone: \*\*\* \*\*\* Fastsigns 413 Western Ave So. Portland SEP 2.9 -**COST OF WORK:** PERMIT FEE: Past Use: Proposed Use: \$054-F-008 \$ 33.00 INSPECTION: 5197998 **FIRE DEPT.** □ Approved Commercia1 same ☐ Denied Use Group: Type: **CBL**: 054**-**F-008 Zone: BOCA99 Signature: Zoning Approval: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT Action: Approved Special Zone or Reviews: Approved with Conditions: ☐ Shoreland building sign Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: K Sept 28 2000 K Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. 2. □ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation 3. □ Approved tion may invalidate a building permit and stop all work.. ☐ Denied **Historic Preservation** □ Not in District or Landmark □ Does Not Require Review ☐ Requires Review Action: **CERTIFICATION** □ Appoved ☐ Approved with Conditions 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, □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit Sept 28 2000 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

WCEO DISTRICT

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