City of Portland, Maine - Build	_			Permit No:	Issue Date:		CBL:
389 Congress Street, 04101 Tel: (2	07) 874-8703 Owner Name:	, Fax: (207) 874-8		2013-01771			058 D011001
Location of Construction: 26 BRACKETT ST (#28)	T STREET LLC	Owner Address: 26 BRACKETT ST PORTLAND, ME 04101		ME	Phone:		
Business Name: Omis Coffee Shop	Contractor Name:		Contractor Address: ME			Phone	
Lessee/Buyer's Name	Phone:		Permit Type:				Zone:
Naomi Hall; hall.naomii@gmail.com	(207) 332-2616		Signs - Side Walk				B1
	Proposed Use:				Cost of Work:		
1st floor 2 retail spaces (seating for no more than 9) with three residential dwelling units above	Same: 1st floor 2 retail spaces with 3 residential dwelling units above.		\$25.40 \$0.00 3 INSPECTION:				
Proposed Project Description:							
Sidewalk sign 20" x 38" for retail unit							
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
		Action: Approved Approved w/			ed w/Con Dat		
Permit Taken By: Date App		Zoning Approval			Du		
bjs 08/09/		Zomig Approvai					
1. This permit application does not p	oreclude the	Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation
Applicant(s) from meeting application Federal Rules.				☐ Variance		Not in District or Landmark	
2. Building permits do not include p septic or electrical work.	Wetland		Miscella	aneous	Does Not Require Review		
3. Building permits are void if work within six (6) months of the date of	of issuance.	Flood Zone		Condition	ıal Use Requi		Requires Review
False information may invalidate permit and stop all work	a building	☐ Subdivision ☐ Site Plan		Interpre	tion App		Approved
				Approve	Approved		Approved w/Conditions
	Maj Minor MM		Denied	☐ Denied ☐		Denied	
	Date:		Date:	Date:		Date:	
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all area such permit.	make this appl work describe	ication as his authored in the application	at the ized a	proposed work agent and I agree aed, I certify that	e to conform to t the code offici	all appl al's autl	icable laws of this horized representative
SIGNATURE OF APPLICANT	ADDRESS			DATE		PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE