

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 312-320 St. John St.		Owner: Amato's Sandwich Shop		Phone:		Permit No:	
Owner Address: 357 Allen Ave.		Leasee/Buyer's Name:		Phone:			BusinessName:
Contractor Name:		Address:		Phone:			
Past Use: <i>Warehouse w/accessory parking</i>		Proposed Use: <i>Restaurant/retail</i>		COST OF WORK: \$		PERMIT FEE: \$50.00 Appeal fee	
Proposed Project Description: Interpretation Appeal		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:		Zone: CBL: B-2 65-A-11	
		Signature:		Signature:			
PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)		Action: Approved <input type="checkbox"/>		Approved with Conditions: <input type="checkbox"/>		Zoning Approval:	
		Denied <input type="checkbox"/>		Signature: Date:			
Permit Taken By: Vicki Dover		Date Applied For: 7/2/96				Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

N/A

APPEAL DENIED 8-1-96

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review


Action:

Approved
 Approved with Conditions
 Denied

Date: _____

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 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 provisions of the code(s) applicable to such permit

 SIGNATURE OF APPLICANT	189 Spurwink Ave., Cape Elizabeth 04107 ADDRESS:	799-4922 DATE:	PHONE:
David Lourie Attorney <i>for Appellants - See Appeal.</i>		RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	
		PHONE:	

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT #5
M. WING