City of Portland, Maine - Buil	U			2013-02324	Issue Date:	065 C001001
389 Congress Street, 04101 Tel: (	· · ·	, Fax: (207) 874-8				
Location of Construction:  939 CONGRESS ST  Owner Name: INN AT ST		OHN THE	Owner Address: 939 CONGRESS ST PORTLAND, ME 04102		Phone: (207) 773-6481	
Business Name:	Contractor Name: Maine Bay Canvas mbcanvas@maine.rr.com		Contractor Address: 53 Industrial Way Portland ME 04103			Phone (207) 878-8888
Lessee/Buyer's Name	Phone:	one:		it Type: ning, no signage	Zone: B2	
Past Use:	Proposed Use:		Permit Fee: Cost of Work:			CEO District:
Inn at St John	Inn at St John		INSP	\$80.00 \$6,000.  PECTION:		00.00 4
Proposed Project Description:	1					
Install 8 new window awnings - 44"						
St & 4 facing Valley St install one x 32" tall	gress St 39" wide	(		P.A.D.) ed w/Conditions Denied		
			S	ignature:		Date:
	pplied For: 1/2013		Zoning Approval			
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
		Shoreland		☐ Varianc	ee	Not in District or Landmar
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>		Wetland		Miscell	aneous	Does Not Require Review
		☐ Flood Zone		Condition	tional Use Requires Review	
		Subdivision		Interpre	etation	Approved
		Site Plan		Approv	ed	Approved w/Conditions
	Maj		_ Denied		Denied	
		Date:		Date:		Date:
I hereby certify that I am the owner of I have been authorized by the owner t jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit.	o make this appl or work describe	lication as his authored in the application	at the ized a	proposed work agent and I agree aed, I certify that	e to conform to a	all applicable laws of this al's authorized representative
SIGNATURE OF APPLICANT		ADDR	RESS		DATE	PHONE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE