| City of Portland, Maine – Building | g or Use Permit Applicati | ion 389 Congress | Street, 04101, Tel: (207) 8 | 74-8703, FAX: 874-8716 |
|---|---|---|---|--|
| Location of Construction: 929 Congress St | Owner: Govednik, | | Phone; | Permit No: 970638 |
| Owner Address: | Lessee/Buyer's Name: Paul & Val's Firehouse | 72 -01 Phone: | BusinessName: gress St Ptld, ME 04102 | PERMIT ISSUED |
| Contractor Name: Maine Bay Canvas | Address: 53 Industrial Way Pt1 | Phone | | Permit Issued: |
| Past Use: | Proposed Use: | COST OF WORK | : PERMIT FEE: | JUN 2 4 1997 |
| Bar | Same | \$ 1,350.00 FIRE DEPT. D A Signature: | sproved inspection: Use Group: Type: Signature: Signature: | CITY OF PORTLAND Zone: CBL: 065-D-014 |
| Proposed Project Description: Erect Awning | , | PEDESTRIAN AC | approved sproved with Conditions: | Special Zone of Reviews: 1/ ☐ Shoreland ☐ Wetland ☐ Flood Zone |
| | | Signature: | Date: | ☐ Subdivision |
| Permit Taken By: Mary Gresik | Date Applied For: | 17 June 1997 | | □ Site Plan maj □minor□mm □ |
| Building permits do not include plumbing, septic or electrical work. 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 | | | | ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied Historic Preservation ☐ Hot in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action: |
| 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 is 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 17 june 1997 SIGNATURE OF APPLICANT Paul Lambert ADDRESS: DATE: PHONE: | | | | Denied Denied |
| RESPONSIBLE PERSON IN CHARGE OF WORK | K, TITLE | | PHONE: | CEO DISTRICT |
| White-Pe | rmit Desk Green-Assessor's C | anary-D.P.W. Pink-Pub | lic File Ivory Card-Inspector | D. Jadan |