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

Location of Construction:	Phon				Permit No:	
		Associates		BusinessName:		Q Q 1 A 4
Owner Address: 15 Lowell St Ptld 04102	Lessee/Buyer's Name:	Phone:		Busines	sName:	DEDMIT ICCLIED
Contractor Name:  **Sign Solutions	Address: 75 Bishop St Pti	 1d 04103	Phone: 878-8000			Pel sur levide
Past Use:	Proposed Use:		COST OF WORK: PERMIT FEE: \$ 2600 \$ 40.40			<b>DEC</b> - 2 (92)
A dot 0.50.	Troposed ese.					
Office	Same	FIRE DEF	РТ. П A			CITY OF PORTLAND
			□ De	nied		Zone: CBL: 067-J-001
					Signature: Hoffa-	
Proposed Project Description:	PEDESTRIAN ACTIVITIES DISTRICT (PAD.) Action: Approved			Zoning Approval:		
Ereat Cianage		Action:	Action: Approved			Special Zone or Reviews:
Erect Signage	Approved with Conditions: Denied			☐ Shoreland ☐ Wetland		
			_		_	☐ Flood Zone
		Signature:			Date:	□ Subdivision
Permit Taken By: Sherry Pinard	Date Applied For:	Norromb	November 19, 1998			☐ Site Plan maj ☐minor ☐mm ☐
				1990		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.						☐ Variance ☐ Miscellaneous
2. Building permits do not include plumbing, septic or electrical work.						☐ Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-						□Interpretation
tion may invalidate a building permit and stop all work						☐ Approved☐ Denied☐
						Historic Preservation
						☑Not in District or Landmark ☐Does Not Require Review
						☐ Requires Review
						Action:
	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 is issued, I certify that the code official's authorized representative shall have the authority to enter all						☐ Approved ☐ Approved with Conditions
						Date:
areas covered by such permit at any reasonable h	our to enforce the provisions of the co	ode(s) applicable	to such p	ermit		<b>Sate</b> :
	•	\- a		1000		
November 20, 1998 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:						-
SIGNATURE OF AFFLICANT	ADDRESS.	DATE:			FIIONE;	
DESPONSIBLE DEPOSITION OF SERVICE	AZ (DIGN D				- NAVONE	
RESPONSIBLE PERSON IN CHARGE OF WOR	K, HILE				PHONE:	CEO DISTRICT
White-P	ermit Desk Green-Assessor's C	anary–D.P.W. P	ink–Publ	ic File	vory Card-Inspector	HKIMW L