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

Location of Construction: ***334 Forest Ave.	Owner: Wyatt Gar: Back Cove		Phone: 773-3356	Permit No: 990303
Owner Address: Lessee/Buyer's Name: Stuart				
SAA	KLC Business Group 883-5422		PERMIT ISSUED	
Contractor Name: N/A	Address: Phone:		Permit Issued:	
Past Use:	Proposed Use:	COST OF WORK	: PERMIT FEE:	- 19 19 19 19 19 19 19 19
		\$ 0	\$ 25.00	
Restaurant	Same	FIRE DEPT. DA		OTV OF DODTI AND
				CITY OF PORTLAND
				Zone: CBL: 114A-F-007
Proposed Project Description:		Signature:		Zoning Approval:
r toposed i toject Description.			PIVITIES DISTRICT (PA.D.)	- Kwith condities
Temporary outdoor dining area on l	Quarkon St		pproved U	Special Zone or Reviews:
(Railings and Awnings dismantled		pproved with Conditions:		
(Kallings and Awnings dismancied s	seasonally.)		enied E	
		Signatura	Deter	□ Flood Zone A16/19 □ Subdivision
Permit Taken By:	Date Applied For:	Signature:	Date:	□ Subdivision / □ Site Plan maj □minor □mm □
ub	Date Applied For.	4-1-99		
				Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				
2. Building permits do not include plumbing, septic or electrical work.				☐ Miscellaneous □ Conditional Use
2. Divilding normits are used if used is not started within six (6) months of the date of issuence. False informed				□ Interpretation
tion may invalidate a building permit and stop all work				
				Denied
			••••	
				/ Historic Preservation
Send to: Stuart Lacognata KLC Business Group 334 Forest Ave.				Whot in District or Landmark
				□ Does Not Require Review □ Requires Review
				Action:
		land, ME 04102		
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				Date:
areas covered by such permit at any reasonable ho	our to enforce the provisions of the c	code(s) applicable to such p	ermit	
4–1–99				
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	-
DECOMICIDI E DEDCON IN CUADCE OF WOR			DUONE	_
RESPONSIBLE PERSON IN CHARGE OF WOR	N, IIILE		PHONE:	
White-Pe	ermit Desk Green–Assessor's C	Canary–D.P.W. Pink–Pub	lic File Ivory Card-Inspector	