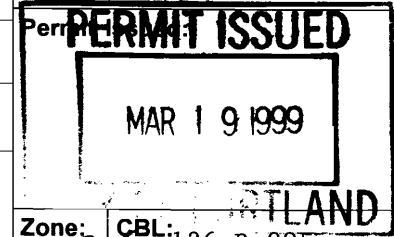


**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

***Location of Construction: 540 Forest Avenue		Owner: Bearly in Business, Inc.		Phone: 772-0300	
Owner Address: SAA		Lessee/Buyer's Name:		Phone:	
Contractor Name:		Address:		Phone:	
Past Use: Restaurant		Proposed Use: Same		COST OF WORK: \$ 800.00	
				PERMIT FEE: \$ 25.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
				INSPECTION: Use Group: Type: B0C896 Signature: <i>[Signature]</i>	
Proposed Project Description: Outside Dining 1999 Season				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>	
Permit Taken By: ub		Date Applied For: March 17, 1999			

Permit No: 990232



Zone: B-2 CBL: 126-B-005  
 Zoning Approval: *ok with same conditions*  
**Special Zone or Reviews**  
 Shoreland *N/A*  
 Wetland  
 Flood Zone *zone*  
 Subdivision  
 Site Plan  maj  minor  mm

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Appoved  
 Approved with Conditions  
 Denied  
 Date: *S*

PERMIT ISSUED WITH REQUIREMENTS

**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 areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT \_\_\_\_\_ ADDRESS: \_\_\_\_\_ DATE: March 17, 1999 PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE \_\_\_\_\_ PHONE: \_\_\_\_\_

CEO DISTRICT 2