

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

Location of Construction: 701 Forest Ave		Owner: Rite Aid Pharmacy		Phone:		Permit No: <b>980370</b>	
Owner Address:		Lessee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: **Bailey Signs		Address: 9 Thomas Drive West. 04092		Phone: 774-2843		Permit Issued: <b>PERMIT ISSUED</b> <b>APR 15 1998</b> <b>CITY OF PORTLAND</b>	
Past Use:  Commercial		Proposed Use:  Commercial		COST OF WORK: \$		PERMIT FEE: \$ 100.04	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: <u>4</u> Use Group: Type: <u>BOCA 96</u>	
Proposed Project Description: 2 ea. 12' x 7' (Free standing) 1 ea. 2' x 10'4" (Drive-thru) (directional) 2 ea. 36" x 16'8" (Rite Aid Pharmacy) 2 ea. 1'2" x 16' 6" ( Drive-thru pharmacy) 2 ea. 1'2" x 10'4" (one-hour photo)		Signature:		Signature: <i>[Signature]</i>		Date:	
Permit Taken By: Sherry Pinard		Date Applied For: April 13, 1998		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: <u>B-2</u> CBL: 129-B-003	
		Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Signature:		Zoning Approval: <i>OK -&gt; condition</i>	
		Signature:		Date:		Special Zone or Reviews: <input type="checkbox"/> Shoreland <i>The two freestanding</i> <input type="checkbox"/> Wetlands <i>signs shall be no</i> <input type="checkbox"/> Flood Zone <i>higher than 15'</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <i>11/5/98</i>	

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.
3. 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..

**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

*Rodney L. Benn*  
SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:  
Rod Benn April 13, 1998

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Approved  
 Approved with Conditions  
 Denied  
Date: *4-15-98* *[Signature]*

CEO DISTRICT *[Signature]*