City of Portland, N	Maine - Bu	ilding or Use	Permi	t Appl	icatio	n Per	rmit No:	Issue Date	:	CBL:	-	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871						6 01-1063				137 C005001		
Location of Construction:		Owner Name:				Owner Address:				Phone:		
803 Forest Ave		Sangillo Michael D				63 Hunts Hill Rd				n/a		
Business Name:		Contractor Name:				Contractor Address:				Phone		
S/A Market		Mike Iosua				173 India Village Shapleigh				2073293207		
Lessee/Buyer's Name		Phone:				Permit Type:				Zone:		
S/A Market		n/a			Additions - Commercial				B-2			
Past Use:		Proposed Use:				Permit Fee: Cost of W		Cost of Wor	k:	CEO District:		
Comm. Food Service			6' Hood over stove		\$36.00 \$2,000		00.00	00 2				
	and 1 Fan for Ventilation			Appioved				SPECTION:				
					Г	Denied	Use Gr	Use Group: Type:				
								Ma	AGE ME JOSHED			
									NA PA	FRAMO	VENTS /	
Proposed Project Description: Install a 6' Hood over stove and 1 Fan for Ventilation							(W			ENAUTH PEOUREMENTS ENAUTH SPINISHED TO THE CT (P.A.D.)		
						Signature:						
						PEDESTRIAN ACTIVITIES DISTRIC						
				Action:			tion: Approved Approved w/Conditions Denied				Denfed	
						Signature:				Date:		
Permit Taken By:		pplied For: 8/2001				Zoning Approval						
This permit application does not preclude the			Special Zone or Revi			ews Zoning Appeal			Historic Preservation			
Applicant(s) from meeting applicable State a Federal Rules.			Shoreland				☐ Variance			Not in District or Landman		
2. Building permits of septic or electrical	plumbing,	Wetland				Miscellaneous			Does Not Require Review			
3. Building permits a within six (6) mon		☐ FI	Flood Zone			Conditional Use			Requires Review			
False information permit and stop all	te a building	Subdivision			[Interpretation				Approved			
			Maj, Minor MA			Approved Denied				☐ Approved w/Conditions ☐ Denied		
			Date:	ed.	30 0		Date:			Date:	2	
				Į.	V.	,			V	PERMIT I VITH REQUI	SSUED REMENT	
			ſ	PEDTIE	Y (* 4 T)	ON						
I hereby certify that I ar	n the owner o	of record of the		CERTIF			nosad worls:	e authorice d	by the	owner of rece	ed and that	
I have been authorized jurisdiction. In addition shall have the authority such permit.	by the owner n, if a permit	to make this appli for work describe	ication a	as his au applicat	thorized tion is is	d agen	nt and I agree I certify that	to conform the code of	to all a	pplicable laws authorized rep	of this resentative	
SIGNATURE OF APPLICANT			ADDRESS			s	DATE			PHONE		
												
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						DATE				PHONE		

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