

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Permit Number: 081347

Please Read
Application And
Notes, If Any,
Attached

This is to certify that SAJON LLC/Caron & Waltz
has permission to Install Kitchen Hood and dish other Hood

AT 182 OCEAN AVE C 140 C012001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is lath or other is used-in. 2 HOUSING NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Carey 11/22/08

Health Dept. _____

Appeal Board _____

Other _____

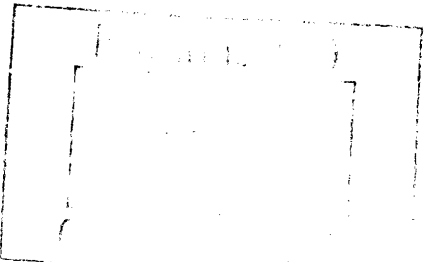
Department Name

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-1347		Issue Date:		CBL: 140 C012001	
Location of Construction: 182 OCEAN AVE		Owner Name: SAJON LLC		Owner Address: 62 FLAVELL RD	
Business Name:		Contractor Name: Caron & Waltz		Contractor Address: 321 Lincoln Street South Portland	
Lessee/Buyer's Name		Phone:		Phone: 2077992228	
Past Use: Commercial - Deli		Proposed Use: Commercial - Restaurant / Bakery - Install Kitchen Hood and dishwasher Hood		Permit Type: Hood Systems, Commerical	
Proposed Project Description: Install Kitchen Hood and dishwasher Hood		Permit Fee: \$140.00		Cost of Work: \$12,000.00	
		CEO District: 4		Zone: B-1	
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied TO NFPA 96 Signature: <i>Corey Cass</i>		INSPECTION: Use Group: <i>EA</i> Type: <i>U</i> <i>IME 2003</i> Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____			
Permit Taken By: Idobson		Date Applied For: 10/22/2008		Zoning Approval	
<ol style="list-style-type: none">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.. 		Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Major <input type="checkbox"/> Minor <input type="checkbox"/> MMR <input type="checkbox"/> Date: <i>10/23/08</i>		Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	
		Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>[Signature]</i>			

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT

ADDRESS

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

DATE

PHONE