Cit	y of Portland, Maine -	Building or Use Pe	rmit A	Appl	ication	P	Permit No:		Issue Dat	e:		CBL:	
	Congress Street, 04101	Ü					04-081	2				143 A06	5001
Location of Construction: Owner Name:						Owner Address:					Phone:		
980 Forest Ave Pickus Owen B				}			Chabot St				:	857-9311	
Business Name: Contractor Nam			ie:			Contractor Address:					P	Phone	
		Sheridan Corpo	Sheridan Corporation			PO Box 359 Fairfield				1	207453931	1	
Lessee/Buyer's Name Phone:					Permit Type:							Zone:	
						Alterations - Commercial							
Past	t Use:	Proposed Use:		1		Permit Fee: Cost of Work:				rk:	: CEO District:		1
none canopy			_			\$52.50			\$3,500.00			4	
						FIRE DEPT:			Tryang an				
					TIKE DEI 1.			Approved				Туре	
									Denied				71
Droi	posed Project Description:												
	nopy to protect & secure ext	arior mounted electrics	l nanale	,		Simple Control							
Cai	nopy to protect & secure ext	crioi mounted electrica	i pancis	,		Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)							
						LED	ESTRIAN AV	CIIV					
						Approv				proved w	ed w/Condition		
		Date Applied For:											
		Date Applied For.											
			Snec	Special Zone or Review							His	storic Pres	ervation
1.		his permit application does not preclude the			one of Kevi	ws					_		
	Applicant(s) from meeting applicable State and										N	lot in Distri	ct or Landm
	Federal Rules.						_						
2.	2. Building permits do not include plumbing, septic or electrical work.											Ooes Not Re	quire Revie
3.	within six (6) months of the date of issuance.												
				_									
False information may invalidate a building permit and stop all work													
										Approved w/Condition			
						_ _			_		_	,	
				Maj 🗌 📗 MM 🛭									
			(CERT	TIFICATIO	N							
I he	reby certify that I am the ow	vner of record of the na	med pro	operty	, or that th	e pr	oposed worl	k is a	uthorized	by the	owne	er of recor	d and that
	ve been authorized by the o												
	sdiction. In addition, if a per												
	Il have the authority to enter	r all areas covered by su	ıch peri	mit at	any reason	nabl	e hour to en	force	the prov	ision of	f the o	code(s) ap	plicable
to si	uch permit.												
SIG	NATURE OF APPLICAN				ADDRESS				DATE	3		PI	HO
				AUDICESS			, DATE				1110		

Location of Construction:	Owner Name:	Owner Address:	Phone:	
980 Forest Ave	Pickus Owen B	2 Chabot St	857-9311	
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Sheridan Corporation	PO Box 359 Fairfield	2074539311	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone	
		Alterations - Commercial		

07/01/2004 **Dept:** Zoning Status: Approved **Reviewer:** Marge Schmuckal **Approval Date:** Ok to Issue: **Note:** revised plans received 7/1/04 showing only a 24" roof overhang Approval Date: 07/02/2004 Dept: Building Status: Approved **Reviewer:** Mike Nugent Ok to Issue: ✓ Note: Dept: Fire Status: Approved Reviewer: Lt. MacDougal **Approval Date:** 06/22/2004 Ok to Issue: Note:

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 APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK. TIT		DATE	PHO