

Form # P 04

Other __

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK — CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PULL DIVISION INCRECTION

PERM

Permit Number: 061177

						l b	FORRIT	ICCHED	
This is to certify that	GRIBIZIS DIMITRI & ANI	A GRIB	IZIS JTS/S	ign A Ra		<u> </u>	ELVIALL	<u>ISSUED</u>	
has permission to	new 4'x 4' sign "Perfect Fit"								
AT 1156 FOREST AN	/E				L 152 A005001		MAY -	1 2007	
	ne nerson or persons	rm or		tion a	enting this p	ermit-e	hall-co	maly with	ے ام

of the provisions of the Statutes of the construction, maintenance and the of buildings and outlier, 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.

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

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ire	Dept.						

Appeal Board

Department Name

Director Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

Cit	ty of Portland, Ma	ine - Buil	lding or Use	Permi	t Application	n Per	mit No:	Issue Date:		CBL:		
	Congress Street, 04		_				06-1177			152 A0	05001	
Loc	ation of Construction:		Owner Name:	,		Owner	r Address:	•		Phone:		
11.	56 FOREST AVE		GRIBIZIS DII	MITRI	& ANILDA G	124 1	HARRIS AV	Έ				
Bus	iness Name:		Contractor Name	: :		Contra	actor Address:			Phone		
			Sign A Rama			245 1	US Route 1	Scarborough		Phone: Phone 2078830075 Zone: 4 PECTION: Group: Type: Type: T (P.A.D.) d w/Conditions Denied)75	
Les	see/Buyer's Name		Phone:			Permit	t Type:			•	Zone:	
						Sign	ns - Permane	nt			150	
Pasi	Use:		Proposed Use:			Permi	it Fee:	Cost of Worl	k:	CEO District:	i i	
Co	mmercial		Commercial/ r	new 4'x	4' sign		\$62.00	\$6	2.00	.00 4		
			"Perfect Fit"		-	FIRE	DEPT:	Approved	INSPE	CTION:	 _	
			Chargeofus	-0	7-0447	}	()	Denied	Use Gr	oup: 🖊	Type:	
			Contractor		• • • •		. / /	7 1 Incu				
								4		IBC Z	003	
Pro	posed Project Description:					1 . ,	/ / /		_	-1	A	
ne	w 4'x 4' sign "Perfect F	it"				Signat	ture:		Signatu	ire:		
						PEDESTRIAN ACTIVITIES DISTRIC			RICT (I	CT (P.A.D.)		
						Action: Approved Approved				Lw/Condition Denied		
						Action	п дррго	тец Дрр	10ved w	Conditions	Bemed	
						Signat	ture:			Date:		
Per	mit Такеп Ву:	Date A	pplied For:		•		Zoning	g Approva	ıl			
ld	obson	08/09	9/2006									
1.	This permit applicati	on does not	preclude the	Spe	cial Zone or Revie	ews	Zoni	ng Appeal		Historic Preservation		
	Applicant(s) from me			St	noreland		☐ Variano	ce	Ì	Not in Distric	ct or Landmar	
	Federal Rules.											
2.	Building permits do septic or electrical w		plumbing,	│ □ w	etland		Miscell	aneous		Does Not Re	quire Review	
3.		ts are void if work is not started		Flood Zone			Conditional Use			Requires Review		
within six (6) months of the date of issuar False information may invalidate a building				Subdivision			[Interpretation			Approved		
	permit and stop all w	ork										
				Si	te Plan		Approv	ed		Approved w/	Conditions	
	· ex en		RESULTA									
				Maj [Minor MM	Denied				☐ Denied		
			1							A FAIN		
			4	Date:			Date:		D	ate:		
				-					<u> </u>		_	
	<u> </u>											
	_											
				C	CERTIFICATI	ON						
I he	reby certify that I am t	he owner of	record of the na	med pro	operty, or that th	ne prop	osed work is	s authorized	by the	owner of recor	d and that	
	n permit.	enter all are	as covered by st	icn pern	nit at any reasoi	nable n	iour to entor	ce the provis	sion of	the code(s) ap	plicable to	
Jac	. po											
SIG	NATURE OF APPLICANT	•			ADDRES	S		DATE		PHO	NE	
RE:	SPONSIBLE PERSON IN C	HARGE OF W	ORK, TITLE		_			DATE		РНО	NE	