City of Portland, Maine - Buil 389 Congress Street, 04101 Tel: (0			2013-01342	Issue Date:		163 B003001	
Location of Construction:	Owner Name:	, rax. (207) 674-6		er Address:			Phone:	
801 WASHINGTON AVE VSHREA		ΓY INC	100 CROSSING BLVD #9003 CANTON, MA 01702		(508) 270-4436			
Business Name:	Contractor Name: Pro Signs prosign.net Phone:		Contractor Address:			Phone		
Cumberland Farms			251 Boot Road Downington PA 19335				(610) 518-5881	
Lessee/Buyer's Name			Permit Type: Signs - Permanent				Zone: B2	
Past Use:	Proposed Use:		Permit Fee: Cost of Work:				CEO District:	
Cumberland Farms - gas staton & convenience store	Cumberland F	arms - gas station	INCD	\$339.62 ECTION:	\$0.00		5	
Proposed Project Description:								
replace existing free standing sign - r sign 20' tall & 6' x 8' - replace building	<u> </u>							
12.38 sf each	ig sign & two ne	e two new eamopy signs		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved w/Conditions Denied				
			Signature: Da				te:	
	en By: Date Applied For: 06/27/2013			Zoning Approval				
This permit application does not preclude the Applicant(s) from meeting applicable State an Federal Rules.		Special Zone or Reviews Shoreland		Zoni	Zoning Appeal		Historic Preservation	
				☐ Varianc	☐ Variance		Not in District or Landmar	
2. Building permits do not include septic or electrical work.	Wetland		Miscella	aneous	Does Not Require Review			
3. Building permits are void if wor within six (6) months of the date	Flood Zone		Condition	onal Use Requi		Requires Review		
False information may invalidate a building permit and stop all work		Subdivision		☐ Interpretation		☐ Approved		
		Site Plan		Approv	ed		Approved w/Conditions	
	Maj Minor MM		Denied	☐ Denied ☐		Denied		
	Date:		Date:	Date:		Date:		
I hereby certify that I am the owner of I have been authorized by the owner t jurisdiction. In addition, if a permit for shall have the authority to enter all are such permit.	o make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify that	to conform to the code offic	all appl ial's autl	icable laws of this norized representative	
SIGNATURE OF APPLICANT	ADDRESS			DATE		PHONE		

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE