

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0900	Issue Date:	CBL: 064 A002001
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Location of Construction: 222 ST JOHN ST	Owner Name: COFFIN CRAIG G TRUSTEE	Owner Address: 222 ST JOHN ST STE 134	Phone: 207-874-6444
Business Name:	Contractor Name: Margaritas Management Group	Contractor Address: 200 Griffin Park, Suite 1 Portsmouth	Phone: 6034308105
Lessee/Buyer's Name	Phone:	Permit Type: Alterations - Commercial	Zone:

Past Use: Commercial Restaurant/Margaritas	Proposed Use: Commercial Restaurant/Margaritas - Interior Alterations to include New Sink and Kitchen Equipment to meet Health Codes.	Permit Fee: \$520.00	Cost of Work: \$50,000.00	CEO District: 2
Proposed Project Description: Interior Alterations to include New Sink and Kitchen Equipment to meet Health Codes.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature: Date:				

Permit Taken By: lmd	Date Applied For: 07/21/2008	Zoning Approval		
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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 Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied
	Date:	Date:	Date:

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

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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 07/23/2008
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Pending	Reviewer:	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>
Dept: Fire	Status: Not Applicable	Reviewer: Capt Greg Cass	Approval Date: 07/24/2008
Note: No Life Safety issues involved			Ok to Issue: <input checked="" type="checkbox"/>

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