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

Location of Construction:	Owner:		Phone:	Permit No: 👰 🔍 🕯 🖉
548 Brighton Ave	Cook, Bernal		772-4127	ال ا
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	DEDA
SAA	Bernside Haircutters			Perinit Issued:
Contractor Name:	Address: P.O. Box 207 Westbrook, ME 04098 856-2600			Permit issued:
Sign Design, Inc.	P.O. Box 207 Westbrook Proposed Use:	COST OF WORK: PERMIT FEE:		-1 DEC -4
Past Use: Salon	Proposed Use.	\$	\$ 35.00	
				CITY OF PORTION
	Same	FIRE DEPT. Approved INSPECTION: Sqnay Denied Use Group: 13 Type: Signature: Signature:		
				Zoneg CBL: 185-D-014
Proposed Project Description:			ACTIVITIES DISTRICT (PA.D.)	Zoning Approval: 3/9 9 w 1 h
		Action:		Special Zone or Reviews:
Install pylon sign				□ □ Shoreland A
		Denied		□ UWetland
				Flood Zone
		Signature:	Date:	
Permit Taken By: MG	Date Applied For:	25 Norrowha	- 1008	Site Plan maj 🗆 minor 🗆 mm 🗅
MG 25 November 1998			Zoning Appeal	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.				□ Variance
2. Building permits do not include plumbir				
				Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa- tion may invalidate a building permit and stop all work				 Interpretation Approved
tion may invaluate a bunding permit an	d stop all work		Pro	
			WITH	
			PERMIT ISSUED WITH REQUIREMENTS	Historic Preservation
			MEMIEAIT	Does Not Require Review
			-11/5	□ Requires Review
				Action:
	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				1
authorized by the owner to make this applica				
if a permit for work described in the application				
areas covered by such permit at any reasonal	le hour to enforce the provisions of the code	(s) applicable to suc	ch permit	Date:
	25 No	vember 1998		}
SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:	
DECRANCIPIE DEDGON IN OUT DOE OF Y			DUONE	
RESPONSIBLE PERSON IN CHARGE OF V	VUKN, IIILE		PHONE:	
Whit	e–Permit Desk Green–Assessor's Can	ary–D.P.W. Pink–F	Public File Ivory Card-Inspector	