Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY	OF	PORTL	.AND
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Please Read Application And Notes, If Any, Attached

PECTION

Allached	PERMIT	Territe realistics	
This is to certify thatCHARTER_WESTGATE L	/Bailey Cinc Company Inc.	PERMIT ISSUED	
has permission to	m.		
AT -1372 CONGRESS ST		JUN 2 / 2000	

e of buildings and

rm or

ine and of the

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and this department.

Apply to Public Works for street line and grade if nature of work requires such information.

ificatio of inspersion mustern and voten permoon proceed for the inspersion of the inspection of the i

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

Darmit Number: 080617

nances of the City of Portland regulating

ctures, and of the application on file in

rion epting this permit shall comply with all

OTHER	REQUIRED	APPROVALS
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Fire Dept. ______

Health Dept. _____

Appeal Board _____

Other _____

Department Name

Markety 6/24/00 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD



City of Po	rtland, Maine	- Buil	ding or Use	Permi	t Application	n Per	mit No:	Issue Date	:	CBL:		
=	ss Street, 04101		-				08-0647			191 B0	19001	
Location of Co	nstruction:		Owner Name:			Owner	Address:			Phone:		
1372 CONC	1372 CONGRESS ST CHARTER W		'ESTG	ATE LLC	800 7	WESTCHES	TER AVE STE S-63		63 617-591-			
Business Name	:		Contractor Name	:		Contra	actor Address:			Phone		
		Bailey Sign Co	ompany	Inc.	9 The	omas Drive	Westbrook		20777428	2077742843		
Lessee/Buyer's	Name		Phone:			Permit	t Type:				Zone:	
						Sign	ıs - Permane	nt			18-6	
Past Use:			Proposed Use:			Permit Fee: Cost		Cost of Wor	k:	c: CEO District:		
		Commercial R	Retail - CVS Pharmacy		\$98.00			\$0.00	0 3			
		·	Install Wall M	Nounted 17'x7' Sign.				Approved	INSPE	SPECTION:		
								Denied	Use G	roup Commoncia	LType: Sug	
			1					_ Demed				
										T BC Z	-003	
Proposed Proje	ect Description:		-		_	1				ction: rouplommacia IBC Z ure: Im 6]		
Install Wall	Mounted 17'x2' S	ign.				Signat	ure:		Signati	ure: Im 6/	24/08	
	7					PEDESTRIAN ACTIVITIES DISTRIC				T (P.A.D.)		
						Action	ı: Appro	ved 🗆 Anı	proved w	/Conditions	Denied	
						/ tettor	т търрго	, , , , , , , , , , , , , , , , , , ,	3101 00 W	reonations	Demea	
						Signat	ture:			Date:		
Permit Taken l	By:	Date Ap	oplied For:			Zoning Approval						
lmd		06/09	9/2008									
1. This per	mit application d	oes not	preclude the	Spe	cial Zone or Revie	ws	Zoni	ng Appeal		Historic Pres	ervation	
Applicant(s) from meeting applicable State and Federal Rules.		able State and	Shoreland		ľ	☐ Variance			Not in District or Landmark			
 Building permits do not include plumbing, septic or electrical work. 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 		☐ Wetland			Miscellaneous			Does Not Require Review				
		☐ Flo	ood Zone		Conditional Use			Requires Review				
		a building	Su	ibdivision	Interpretation			- }	Approved			
				Sit	te Plan		Approve	ed		Approved w/	Conditions	
PERMIT ISSUED] Maj نہ	Minor MM	Denied				☐ Denied			
	1 3 13 4 13 1 13		7	Doto	Tol	<i>?</i>	Date:			, , , ,	_ \	
				Date:	-6/13/6	99) 1	Date.			vate:		
	0.00 2.7	P/ ()			('/							
ŧ	Page 1 A Street Transport	1	310									
	A STATE OF THE STA		1 1 1 2									
				C	ERTIFICATION	ON						
I hereby certi	fy that I am the ov	wner of	record of the na				nsed work is	authorized	hy the	owner of recor	d and that	
I have been a	uthorized by the o	wner to	make this appli	cation a	is his authorized	l agent	and I agree	to conform	to all a	pplicable laws	of this	
jurisdiction.	In addition, if a pe	ermit fo	r work described	l in the	application is is	sued, I	certify that	the code off	icial's a	uthorized repr	esentative	
shall have the	authority to enter	all area	as covered by su	ch pern	nit at any reason	able h	our to enforc	e the provi	sion of	the code(s) ap	plicable to	
such permit.												
SIGNATURE C	F APPLICANT			_	ADDRESS			DATE		PHO	NE	
												
RESPONSIBLE	PERSON IN CHARG	GE OF W	ORK, TITLE					DATE		PHO	NE	