Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

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389 Congress Street, 04101 Tel: (207) 874-8703 Location of Construction: Owner Name:		, I un (201) 017-0	Owner Address:		Phone:	-	
191 Westland Ave	Italian Heritag	e Center		40 Westland Ave		772-2500	
Business Name:		Contractor Name:		ess:	Phone		
	Dahlgren	Dahlgren		412 Rt. 1 Yarmouth			
essee/Buyer's Name Phone:				Permit Type:		Zone:	
			Alterations -	Commercial		Ba	
Past Use:	t Use: Proposed Use:		Permit Fee:	Cost of Work:	CEO District:		
Italian Heritage Center		Italian Heritage Center with angled		0 \$14,000.0	00 3		
roof over flat		oortico	FIRE DEPT:	Denied Use		PECTION: e Group: A - 3 Type: 35	
Install angled roof over flat portico			Signature:	WMM) si	ignatur (V)	<u> </u>	
			PEDESTRIAN A	CTIVITIES DISTRI	CT (P.A.D.)		
			Action: A	pproved Approv	ved w/Conditions	enied	
·			Signature:		Date:		
Permit Taken By: gg	Date Applied For: 05/28/2003		Zon	ing Approval	/		
	<u> </u>	Special Zone or Re	views	Loning Appeal	Historic Preser	vation	
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 		☐ Shoreland	☐ Van	iance	Not in District	or Landmarl	
		☐ Wetland	☐ Mis	scellaneous	Does Not Requ	ire Review	
3. Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Flood Zone	. Co	nditional Use	Requires Revie	w	
	False information may invalidate a building permit and stop all work.		Subdivision		Approved		
•		Subdivision		erpretation	Approved		
•		Subdivision Site Plan		proved	Approved w/Co	onditions	
•		_		proved		onditions	
•		Site Plan		proved	☐ Approved w/Co	onditions	
•	owner of record of the na owner to make this appl permit for work describe	CERTIFICA amed property, or that ication as his authorid in the application i	Date: Date: TION It the proposed wo zed agent and I ags issued, I certify to the proposed wo to the propo	rk is authorized by ree to conform to that the code offici	Denied Date: The owner of record all applicable laws of tall's authorized representations.	and that f this sentative	

DATE

PHONE

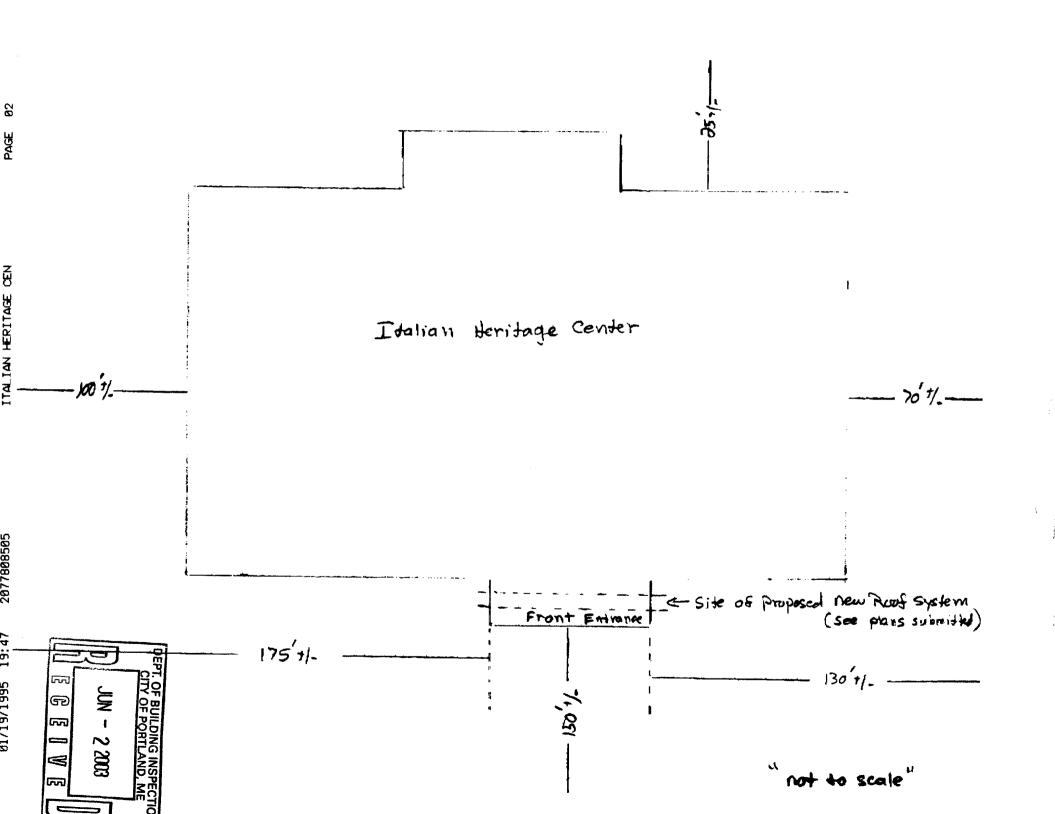
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

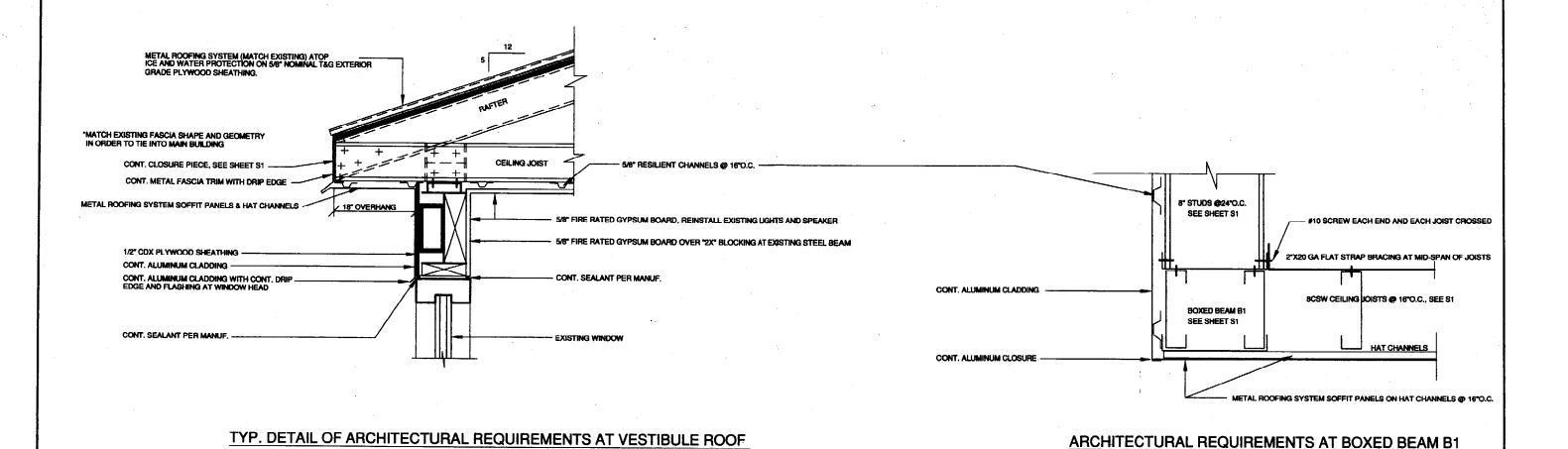
0 3 0 5 7 2

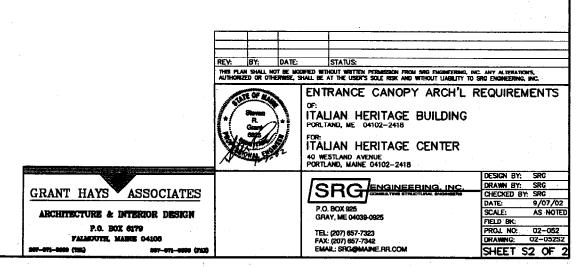
All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

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Location/Address of Construction: 191	140 Westland Ave
Total Square Footage of Proposed Struct	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 191 B 18	Owner: Italian Heritage Center Telephone: 772-2500
Lessee/Buyer's Name (If Applicable)	Applicant name, address & Cost Of Work: \$ 14,000. The Real Containing Fee: \$ 121.00
Current use:	
f the location is currently vacant, what w	as prior use://A
Approximately how long has it been vac	
Proposed use: 14/1AN /	
Project description: Thank Englance Roof	No Footprint Change
Contractor's name, address & telephone:	No Foot PRINT Change DAHLGREN CONTSTRUCTION
Vho should we contact when the permit	Is ready Chis DAHLGREN
Vito should we contact when the pentility	is ready.
Malling address: 4/12 Rt (yomouth me	
ve will contact you by phone when the p	oermit is ready. You must come in and pick up the permit and my work, with a Pian Reviewer. A stop work order will be issued
FORMATION IN ORDER TO APROVE THIS PE ereby certify that I am the Owner of record of the no we been authorized by the owner to make this appli- adiction. In addition, if a permit for work described in	UDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY SP/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL ERMIT. amed property, or that the owner of record authorizes the proposed work and that lication as his/her authorized agent. I agree to conform to all applicable laws of the highest proposed in this application is issued. I certify that the Code Official's authorized representative this permit at any reasonable hour to enforce the provisions of the codes applicable.
gnature of applicant:	Date: 5/28/03
y mas	
This is NOT a permit, you may no	of commence ANY work until the Report Commence ANY work and
ou are in a Historic District you mo	ry be subject to additional permitting and fees with the
ou are in a Historic District you mo	a continuondo via trons cini il o kiaturitatio de co







ARCHITECTURAL REQUIREMENTS AT BOXED BEAM B1

