

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK**CITY OF PORTLAND**

Please Read
Application And
Notes, If Any,
Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 040241

This is to certify that Italian Heritage Center/Sign signhas permission to New 2.5' x 8' signage over main entranceAT 191 Westland Ave 191 B018001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and when permission is procured before this building or part thereof is altered or closed-in. **HEAR NOTICE IS REQUIRED.**

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

OTHER REQUIRED APPROVALS

Fire Dept.

PERMIT ISSUED

Health Dept.

Appeal Board

MAR 18 2004

Other

Department Name
CITY OF PORTLAND


PENALTY FOR REMOVING THIS CARD

James Burke 3/18/04
Director - Building & Inspection Services

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Location of Construction: 191 Westland Ave		Owner Name: Italian Heritage Center	Owner Address: 40 Westland Ave	Phone:
Business Name:		Contractor Name: Sign Design	Contractor Address: 306 Warren Ave Portland	Phone: 2078562600
Lessee/Buyer's Name		Phone:	Permit Type: Signs - Permanent	Zone: B2
Past Use: Fraternal Organization	Proposed Use: Fraternal Organization w/new 2.5' x 8' signage over main entrance		Permit Fee:	Cost of Work: \$0.00
Proposed Project Description: New 2.5' x 8' signage over main entrance			CEO District: 3	
			FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
			INSPECTION: Use Group: Type: B 1949 519n Signature: JMB 3/18/04	
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: Date:	

Permit Taken By: kwd	Date Applied For: 03/12/2004	Zoning Approval		
<ol style="list-style-type: none">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.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 Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Major <input type="checkbox"/> Minor <input checked="" type="checkbox"/> MM Date: 3/16/04	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied 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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE