City of Portland, Ma	ine - I	Building or Use 1	Permit Applicat	ion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 04	el: (207) 874-8703	Fax: (207) 874-8	716	2013-01196			209A A016002		
Location of Construction:		Owner Name:	Owner Name:					Phone:	
145 JETPORT BLVD			WIDEWATERS NEW CASTLE PORTLAND LLC		5786 Widewaters Parkway DEWITT NY 13214			(314) 445-2424	
Business Name:		Contractor Name	Contractor Name:		Contractor Address:			Phone	
Hilton Garden Inn			Widewaters New Castle sranieri@widewaters.com		5786 Widewaters Parkway Dewitt NY 13214			(314) 445-8540	
Lessee/Buyer's Name		Phone:		Permit Type:				Zone:	
					ditions - Comr	AB R2			
Past Use:		Proposed Use:				Cost of Work:			
Hotel (Hilton Garden Inn)		Same: Hotel (I	Same: Hotel (Hilton Garden Inn)		\$9,731.06 \$971,000.00 INSPECTION:				
Proposed Project Description:									
36 room addition to exist	e South Portland								
side. On Portland side: 2	6 new p			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
changes to existing lobby					Action: Approved Approved w/Conditions Denied				
D '4 /F. L D	Г	Signature:			Da	ate:			
Permit Taken By: bjs	Taken By: Date Applied For: Zoning 06/11/2013								
1. This permit application does not preclude the			Special Zone or Review		Zo	Zoning Appeal		Historic Preservation	
Applicant(s) from mo			Shoreland		☐ Varia	☐ Variance ☐		Not in District or Landman	
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Misce	Miscellaneous		Does Not Require Review	
3. Building permits are within six (6) months	date of issuance.	Flood Zone		Cond	Conditional Use		Requires Review		
False information mapermit and stop all w	idate a building	☐ Subdivision		Interp	_ Interpretation _		Approved		
			Site Plan		Appro	oved		Approved w/Conditions	
	Maj Minor MM		Denie	Denied		☐ Denied			
			Date:		Date:		Date:		
I hereby certify that I am t I have been authorized by jurisdiction. In addition, i shall have the authority to such permit.	the ow:	ner to make this appl nit for work describe	ication as his authord in the application	at the ized a	proposed wor agent and I agr all led, I certify the	ree to conform to nat the code office	all app cial's au	licable laws of this thorized representative	
SIGNATURE OF APPLICANT	1		ADDF	RESS		DATE		PHONE	