

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

Location of Construction: ** 2445 Congress Street, Portland 04102		Owner: ** Jody Sataloff		Phone: 775-6128	Permit No: 00066
Owner Address: same		Lessee/Buyer's Name: N/A		Phone: N/A	Business Name: N/A
Contractor Name: Bailey Sign		Address: Westbrook, ME		Phone: 774-2843	
Past Use: Fitness Center/Indoor Tennis Facility		Proposed Use: same		COST OF WORK: \$	PERMIT FEE: \$ 30.00
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: <i>signature</i> Use Group: Type: <i>BOCA99</i>
Proposed Project Description: construct a 5' x 6' illuminated sign				Signature: <i>Hoffner</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>	
Permit Taken By: Gina		Date Applied For: May 24, 2000		JF	

Permit Issued:
JUN 22 2000
CITY OF PORTLAND

Zone: *IM* CBL: 239-A-001

Zoning Approval:
of per revised
Special Zone of Reviews:
 Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
Date: *[Signature]*

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: May 24, 2000 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

CEO DISTRICT ISSUED WITH REQUIREMENTS