City of Portlan	d, Maine - Buil	ding or Use	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389 Congress Str	eet, 04101 Tel: (2	207) 874-8703	Fax: (207) 874-8	3716	2013-01833		263A A005001
Location of Construct	ion:	Owner Name:		Owne	er Address:		Phone:
1110 BRIGHTON AVE		CENTRO HERITAGE SPE 4 LLC		131 DARTMOUTH ST BOSTON, MA 02116			١,
Business Name:		Contractor Name:		Contractor Address:			Phone
Pine Tree Shopping Center		Tommy Smith tsmithtandeconst@aol.com		112 S Pine Street, Suite 200 Florence AL 35630			(256) 394-9580
Lessee/Buyer's Name		Phone:		Permit Type:			Zone:
National Bath Systems LLC (Bath Fi				Alterations - Commercial			B2
Past Use:		Proposed Use:		Permit Fee: Cost of Work:			CEO District:
Shopping Center with Retail (Music Store), personal services & restaurant(s)		Same: Retail (Bath Fitters), personal sevices & restaurant(s)		INSP	\$440.00 ECTION:	\$42,0	000.00 6
Proposed Project Desc	•						
Renovation of vac	Fitter sales and						
distribution shop t	stalls		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
		Action: Approved Approved Approved Signature:		roved Approv	ved w/Conditions Denied		
	•				Date:		
Permit Taken By: Date Applied For: 08/15/2013			Zoning Approval				
1. This permit a	pplication does not	preclude the	Special Zone or Reviews Shoreland		Zo	ning Appeal	Historic Preservation
	from meeting applic				☐ Varia	nce	Not in District or Landma
 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		☐ Misce	ellaneous	Does Not Require Review
			Flood Zone		Cond	itional Use	Requires Review
			☐ Subdivision ☐ Site Plan Maj ☐ Minor ☐ MM ☐		Interp	pretation	Approved
					Appro	oved	Approved w/Conditions
	Denie	ed			Denied		
	Date:		Date:		Date:		
I have been author jurisdiction. In add	ized by the owner to lition, if a permit fo	o make this appl or work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agrued, I certify the	ee to conform to at the code offic	y the owner of record and that all applicable laws of this sial's authorized representative on of the code(s) applicable to
SIGNATURE OF APP	ADDI	RESS		DATE	PHONE		
RESPONSIBLE PERS	ON IN CHARGE OF W	ORK, TITLE				DATE	PHONE