Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read									
Application And									
Notes, If Any,									
Attached									

PERMI

C/The

P	ermit Number: 070257
-1	DEDINIT ICCLIES
- 1	PERMIT ISSUEL
- 1	LIMIT 1000
1	The same of the sa

This is to certify that ____BOUNTY DEVELOPMENT

has permission to ______install new 24" x 72" sign mo

AT 190 RIVERSIDE ST

provided that the person or persons, of the provisions of the Statutes of I the construction, maintenance and this department.

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

m or contain a cepting this permit shall comply with all ine and of the containes of the City of Portland regulating of buildings and sectures, and of the application on file in

267 A005001

fication inspect norms

and wan permit on procubrethis ding or thereo

and or control osed-in.

JR NOTICE IS REQUIRED.

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

Monash Markly 3/20/07

APR - 9 2007

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. ____

Appeal Board ____

Other ______ Department Name

PENALTY FOR REMOVING THIS CARD



City of Portland, N		_			- 1	07-0257	Issue Date:		267 A0	005001	
Location of Construction:	(207) 874-8703, Fax: (207) 874-8716			Owner Address:				Phone:			
190 RIVERSIDE ST	BOUNTY DEVELOPMENT LLC			ONE CANAL PLAZA 5TH FLOOR				1			
Business Name:	Contractor Name:			Contractor Address:				Phone			
Eliason Dental Laborate	The Signery			299 Forest Avenue Portland			2078797700				
Lessee/Buyer's Name	Phone:			Permit Type:					Zone:		
		<u> </u>		<u> </u>		gns - Permanen				15-	
Past Use:	Proposed Use:							EO District:			
Commercial Eliason De Laboratory connected v	Eliason Dental Laboratory connected w/ permit #061080 -			\$54.00 \$54.00 FIRE DEPT:				3			
#061080	" permit	install new 24" x 72" sign mounted			Approved Use Grou			Commencia	Drype: 5B		
		to building			Denied Ose of				-0-0		
								I	BC L	1003	
Proposed Project Description		•							.1	<i>f</i> 1 -	
install new 24" x 72" si	gn mounted to	building	ing			Signature: Signatu			roup Common Madrype: 5B TBC 2003 ure: Jm 3/20/07		
(2' +6')					PEDESTRIAN ACTIVITIES DISTRICT (P.A.				.D.)	, .	
					Acti	ion: Approve	ed App	roved w/Co	nditions	Denied	
					Sign	nature:		D	ate:		
Permit Taken By:		oplied For:				Zoning	Approva	.1			
Idobson	03/14	4/2007							TI Z : 10		
1. This permit applica			Spe	ecial Zone or Revie	ws Zoning Appeal			Historic Preservation			
Applicant(s) from Federal Rules.	meeting applic	cable State and	St	Shoreland		Variance			Not in District or Landma		
2. Building permits do not include plumbing, septic or electrical work.				etland/		Miscellaneous			Does Not Require Review		
3. Building permits as within six (6) mont					Conditional Use			Requires Review			
False information repermit and stop all		a building	☐ Su	ıbdivision	☐ Interpretation				Approved		
			☐ Si	te Plan		Approved	i		Approved w	/Conditions	
-	errapi ayanlığının ili başırılığı kayan biri yazırı biri yazırı bari		Maj [Minor MM		Denied			Denie	\mathcal{L}	
PEI	RMIT ISSU	LD	Date:	1/1/1)	Date:		Date	. ,)	
			Dute.	2/12/18	+-	Date.	<u> </u>	Date			
l l Al	PR - 9 200	7			•						
CITY	OF PORTI	AND I									
	US LOSSIE	-MILD		CERTIFICATION) N						
I hereby certify that I am	the owner of	record of the na				oposed work is	authorized	hy the ow	mer of reco	rd and that	
I have been authorized b	y the owner to	make this appli	ication	as his authorized	l age	nt and I agree to	o conform t	o all appl	icable laws	of this	
jurisdiction. In addition shall have the authority t											
such permit.	o cinci ali afe	as covered by St	ien peri	int at any feasof	iauie	nour to emorce	e me provi	SIOH OF THE	code(s) ap	рисавіе к	
SIGNATURE OF APPLICANT				ADDRESS	S DATE				PHONE		
RESPONSIBLE PERSON IN	CHARGE OF W	ORK, TITLE					DATE		PHC	NE	