•	y of Portland, Main Congress Street, 0410		0				10-0192	Issue Date	:	267 A0	05001	
	tion of Construction:	01 161. (Owner Name:	, гах. (207) 874-871		on Address.			Phone:	03001	
190 Riverside St (unit 5B)			Bounty Development Llc			Owner Address: One Canal Plaza 5th Floor				r none.		
Business Name:			Contractor Name:			Contractor Address:				Phone		
			Allen Sween & Digital			25 Washington Ave. Scarborough				20751068	2075106800	
			Phone:	<u> </u>			Permit Type:				Zone:	
						Sig	ns - Permane	nt				
Past	Use:		Proposed Use:			Perm	Permit Fee: Cost of Work:		k:	CEO District:		
				nmercial / light maunufacturing		\$0.0		\$0.00	3			
store)			& sales - Erect attached 8' x 2' building wall sign - "Kids Crooked House"			Approved				SPECTION: e Group: Type:		
Prop	osed Project Description:		<u> </u>									
	ct attached 8' x 2' buildi	ng wall si	gn "Kids Croo	ked Ho	use"	Signa	ature:		Signati	ure:		
		C				PEDESTRIAN ACTIVITIES DISTRICT				(P.A.D.)		
						Actio	on: Appro	ved App	proved w	/Conditions	Denied	
						Signa	ature:			Date:		
			pplied For: 1/2010			Zoning Approval						
88				Special Zone or Reviews		ws	Zoning Appeal			Historic Preservation		
1.	Applicant(s) from meeting applicable S Federal Rules.			Shoreland			☐ Variance			☐ Not in District or Landmarl		
2.	Building permits do not include plumbing septic or electrical work.			Wetland			Miscellaneous			☐ Does Not Require Review		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.			Flood Zone		Conditional Use			Requires Review			
False information may invalidate a building permit and stop all work			e a building	Subdivision			☐ Interpretation					
				Sit	te Plan	Approved				Approved w/Conditions		
				Maj [Minor MM	Denied				Denied Date:		
				Date:			Date:					
that this j repre	reby certify that I am the I have been authorized jurisdiction. In addition esentative shall have the e(s) applicable to such p	by the own, if a permeter authority	ner to make this nit for work desc	amed pr applica cribed in	tion as his authon the application	he pro orized n is iss	l agent and I a sued, I certify	agree to con that the co	form to de offic	all applicable cial's authorized	laws of	
couc	(b) applicable to such p	VI IIII (.										
SIGN	NATURE OF APPLICANT				ADDRES	S		DATE	<u> </u>	PHO	NE	

Location of Construction:	Owner Name:		Owner Address:	Phone:	
190 Riverside St (unit 5B)	Bounty Development Llc		One Canal Plaza 5th Floor		
Business Name:	Contractor Name:		Contractor Address:	Phone	
Kids Crooked House	Allen Sween & Digital		25 Washington Ave. Scarborough	2075106800	
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:
			Signs - Permanent		

Dept: Zoning **Status:** Approved **Reviewer:** Ann Machado **Approval Date:** 03/15/2010

Note: Change of use permit - #10-0239 Ok to Issue: ✓

Dept: Building **Status:** Approved with Conditions **Reviewer:** Jeanine Bourke **Approval Date:** 03/23/2010

Note: Ok to Issue:

1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.

Comments:

3/4/2010-amachado: Spoke to Amanda. Need to do change of use permit. Space was vacant for three years; it was UPS store before. "Kids Crooked House" is light manufacturing with sales office/showroom. Need tenant frontage.

3/15/2010-amachado: Marge signed off on change of use permit.

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