

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

04-0928	Issue Date:	CBL: 274 A006001
---------	--------------------	----------------------------

Location of Construction: 1081 Brighton Ave	Owner Name: Yeaton, Dirk	Owner Address: 200 Ocean Ave	Phone: 772-3031
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone 0000000000
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone:

Past Use: Cafe restaurant	Proposed Use:	Permit Fee: \$62.00	Cost of Work: \$0.00	CEO District: 3
Proposed Project Description: install 4x4 sign on Brighton Ave side of property		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) <input type="checkbox"/> <input type="checkbox"/> Approved w/Condition <input type="checkbox"/>				

Date Applied For:			
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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..	Special Zone or Reviews		Historic Preservation
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Not in District or Landma
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Does Not Require Revie
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Approved w/Condition
Maj <input type="checkbox"/>	<input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO

Location of Construction: 1081 Brighton Ave	Owner Name: Yeaton, Dirk	Owner Address: 200 Ocean Ave	Phone: 772-3031
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone 0000000000
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone:

Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 07/09/2004
Note: 7/9/04 I spoke with Dirk & explained the 25 ft triangle that limited signs to be no higher than 3.5 ft. I also explained that I needed a plot plan and that the sign needed to be 5' from the property lines. He will get me a plot plan. - He brought in plans later in morning - ok			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 07/15/2004
Note:			Ok to Issue: <input checked="" type="checkbox"/>

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 APPLICAN	ADDRESS	DATE	PHO
-----------------------	---------	------	-----

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT	DATE	PHO
---	------	-----