	ty of Portland, Main Congress Street, 0410		O			2013-01980	Issue Date:		315 A001001	
	ation of Construction:		wner Name:	, rax. (207) 674-6		r Address:			Phone:	
659 WARREN AVE			215 FORESIDE ROAD LLC			215 FORESIDE RD SOUTH PORTLAND, ME 04106			r none.	
Bus	iness Name:	C	Contractor Name:			actor Address:		Phone		
	bitat for Humanity - ReSt hit#3		Sign Concepts on@signconc	eptsmaine.com	75 Bishop Street Portland ME 04103		03	(207) 699-2920		
Less	see/Buyer's Name	Pl	hone:			Type: as - Permanent			Zone: B4	
Past	t Use:	Pi	roposed Use:			t Fee: Cost of Work:		CEO District:		
Carpet & Rug Depot			Habitat for Hu 01560)	imanity (#2013-		\$370.00 ECTION:				
D	I Duning A Description									
	posed Project Description:	nding sign	- Δ' v 10' & Δ'	x 8' & inetall two	0					
Install two panels in free standing sign - 4' x 10' & 4' building signs - 4' x 20'4" & 3' x 8'				x o & mstan two	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
				Action: Approved Approved		ed w/Cor				
_		le			S	ignature:		Da	te:	
	mit Taken By: obson	ied For: 2013	Zoning Approval							
This permit application does not Applicant(s) from meeting application Federal Rules.			eclude the	Special Zone or Reviews Shoreland		Zoni	Zoning Appeal Variance		Historic Preservation	
						☐ Variance			Not in District or Landmar	
2.	septic or electrical work.			Wetland		Miscell	aneous	Does Not Require Review		
3.	Building permits are vo within six (6) months of	f the date of	fissuance.	Flood Zone		Conditi	onal Use	Requires Review		
False information may invalidate a building permit and stop all work			bunding	Subdivision		Interpre	tation	Approved		
				Site Plan		Approv	I Appro		Approved w/Conditions	
				Maj Minor MM Date:		Denied			Denied	
						Date:	Date:		Date:	
I ha juri sha	ereby certify that I am the tive been authorized by the sdiction. In addition, if a Il have the authority to en	e owner to no permit for w	nake this appl work describe	ication as his authord in the application	at the ized a	proposed work agent and I agree aed, I certify tha	to conform to the code offic	all app ial's aut	licable laws of this horized representative	
suc.	h permit.									
SIGNATURE OF APPLICANT				ADDF	RESS		DATE		PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE