City of Portland, Maine - Build	O			2012 02259	Issue Date:		CBL:
389 Congress Street, 04101 Tel: (2		, Fax: (207) 874-8		2013-02258			316 A00500B
Location of Construction: 741 WARREN AVE Owner Name: AEC REATL		Y LLC	Owner Address: 739 WARREN AVE PORTLAND , ME 04103) ,	Phone:	
Business Name:	Contractor Name: Gorham Sand & Gravel		Contractor Address: 939 Parker Farm Road Buxton ME 04093			Phone (207) 839-2442	
Lessee/Buyer's Name	Phone:		Permit Type: Site Alteration				Zone:
Past Use:	Proposed Use:		Permit Fee: Cost of Work:			CEO District:	
Emergency Veterinary Clinic & Same: Emerge Clinic & Office		es \$30.00 INSPECTION:			\$0.00 8		
Proposed Project Description: Site Alt ONLY; Proposed parking are	a and ra stripin	a of ovictina					
parking.	·		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
	Action: Approved Approved w			ed w/Con			
Permit Taken By: Date Ap	1				Da	te:	
bjs 10/04	Zoning Approval						
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation
		Shoreland		☐ Varianc	☐ Variance		Not in District or Landmar
2. Building permits do not include p septic or electrical work.	☐ Wetland		Miscell			Does Not Require Review	
3. Building permits are void if work within six (6) months of the date False information may invalidate	Flood Zone			Conditional Use		Requires Review	
permit and stop all work		Subdivision		Interpre	Interpretation		Approved
	Site Plan		Approv	Approved		Approved w/Conditions	
	Maj Minor MM		Denied	☐ Denied		Denied	
	Date:		Date:	Date:		Date:	
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit fo shall have the authority to enter all are such permit.	make this appl r work describe	lication as his authored in the application	at the rized a is issu	proposed work gent and I agree led, I certify that	to conform to	all appl ial's aut	licable laws of this horized representative
SIGNATURE OF APPLICANT	ADDF	RESS		DATE		PHONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE