364/03 - chaped rebat row flows.

Chebe from of partial chal-notWillsome Weld lest well rolled on the will focus wells partially open to my about.

						PERMIT ISSUED					
City of Portland, Mai	ine - Buildi	ng or Use	Permi	t Applicatio	n Permit No);	Issue Date	:	CBL:		
389 Congress Street, 042						-0144	M/40 1	0.2003	324 B0	10001	
Location of Construction:		Owner Name:			Owner Address: Phone:						
752 Riverside St	E	Brenner Howard S &			62 Craigie St CHY UP PUHTI AND 207-774-5203					5203	
Business Name:	C	Contractor Name:			Contractor Address:				Phone		
n/a National S			tures, I	nc.	145 Swiggat Park Circle Syacuse				3154130100		
Lessee/Buyer's Name		Phone:			Permit Type:					Zone:	
n/a n/		n/a			Alterations - Commercial					B2	
Past Use:		Proposed Use:			Permit Fee: Cost of Work: CEO District:						
Commercial / Retail		Retail / Interior alterations;			\$303.00 , \$40,000.00 1						
		removing particians using metal studs.			FIRE DEPT: Approved INSPECTION:						
					Denied Use				e Group: M Type: 2		
					I	L.	Demed			1/-	
									~ 31	7/85	
Proposed Project Description:				-						$\gamma(\cdot)$	
Interior alterations; removing particians using metal s					Signature: Signature: Ull					lun	
					PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)						
				Action: Approv			ed Approved w/Conditions Denied				
					Signature:			Date:			
Permit Taken By:	Date Appli	pplied For:			Z	oning	Approva	<u> </u>			
gg 02/28/2003							pp-0.0				
1. This permit application does not preclude the			Spe	cial Zone or Revie	ws /	Zonin	g Appeal		Historic Pres	ervation	
Applicant(s) from mee Federal Rules.	eting applicab	able State and Shoreland			Variance Variance			Ì	Not in District or Landmark		
2. Building permits do not include plumbing, septic or electrical work.			Special Zone or Reviews Shoreland Variance Wetland Miscellaneous Conditional Use					Does Not Require Review			
3. Building permits are v within six (6) months of	is not started Flood Zone			Conditional Use				Requires Review			
False information may permit and stop all wo		Subdivision		☐ Interpretation				Approved			
			☐ Sit	e Plan	Approved				Approved w/Conditions		
			Maj [Minor MM		Denied			Denied (2	
<i>;</i>			Date:	2 1	Date:			Date:	Date:		
				,							
I hereby certify that I am the I have been authorized by the jurisdiction. In addition, if a shall have the authority to ensuch permit.	ne owner to ma a permit for w	ake this appli- ork described	med procation a	s his authorized application is is	ne proposed of agent and I sued, I certif	agree to	o conform (he code off	o all applicion of a contract	cable laws orized repr	of this esentative	
SIGNATURE OF ARRUSANTS				A 700 00 00 00							
SIGNATURE OF APPLICANT				ADDRESS	DATE			PHONE			

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE