City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Owner: Phone: Permit No: 828-5981 Amato's Sandwich Shop Inc. 1379 Washington Ave Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 312 St John St Permit Issued: Phone: 892-2744/329-5825 Contractor Name: Address: 27 Wards Hill Rd Gorham 04038 SEP - 8 1999 ***Great Falls Builders, Inc. **COST OF WORK:** PERMIT FEE: Proposed Use: Past Use: 60,000 384.00 FIRE DEPT. Approved **INSPECTION:** Same Sandwich Shop ☐ Denied Use Group: Type: CBL: 401-A-001 Signature: Signature: Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved with Conditions: ☐ Shoreland Construction addition as per plans Denied □ Wetland ☐ Flood Zone □ Subdivision Signature: Date: Site Rlan maj □minor □mm □ Date Applied For: Permit Taken By: SP August 26, 1999 sp Zoning Appeal □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use □ Interpretation 3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa-DayoradA tion may invalidate a building permit and stop all work.. □ Denied Historic Preservation Not in District or Landmark ☐ Does Not Require Review □ Requires Review PERMIT ISSUED Action: WITH REQUIREMENTS CERTIFICATION ☐ Appoved □ Approved with Conditions 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 □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit August 27, 1999 DATE: SIGNATURE OF APPLICANT ADDRESS: PHONE: RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT